



GERHARZ EQUIPMENT

LEASE APPLICATION

GERHARZ EQUIPMENT
 6146 E. Molloy Rd.
 East Syracuse, NY 13057
 Tel: 315-463-0639
 www.gerharzequipment.com

Fax to 315-463-1939
 Or e-mail to info@gerharzequipment.com

COMPANY INFORMATION

| | | | | |
|--|------------------------|------------------|------------------------------|-------------------------|
| Exact Legal Name of Business | | DBA | | |
| Company Street Address | City | State | Zip | County |
| Equipment Location Address (if different) | City | State | Zip | County |
| Company Contact Name | Business Telephone No. | Business Fax No. | Email | |
| Federal Tax ID No. | State of Incorp. | Date Established | Yrs. Under Current Ownership | |
| Business Type <input type="checkbox"/> Non-Profit Corp <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC | | | | Company Website Address |

OWNERSHIP (ALL PERSONAL GUARANTORS MUST SIGN THE APPLICATION BELOW)

| Principals | Ownership | Social Security No. | DOB | Home Address | City | State | Zip | Telephone No. |
|------------|-----------|---------------------|-----|--------------|------|-------|-----|---------------|
| | % | | / / | | | | | |
| | % | | / / | | | | | |
| | % | | / / | | | | | |
| | % | | / / | | | | | |

REFERENCES (ONE BANK AND A TRADE REFERENCE IS REQUIRED)

| | | | |
|----------------------|--------------------------|-----------------------------------|------------------------------|
| 1. Bank | City | State | Contact Name |
| Lease/Loan Acct. No. | Lease/Loan Original Date | Lease/Loan Original Term (months) | |
| Checking Acct. No. | Telephone No. | Fax No. | |
| 2. Trade Creditor | City | State | Contact Name & Telephone No. |

BUSINESS PROPERTY

| | | |
|--|--------------------------|------------------------------|
| <input type="checkbox"/> Own <input type="checkbox"/> Rent | Landlord or Mortgage Co. | Contact Name & Telephone No. |
|--|--------------------------|------------------------------|

LEASE TERMS (PLEASE ATTACH A SEPARATE SHEET TO THIS APPLICATION IF MORE SPACE IS NEEDED)

| | | |
|---|--|----------------------|
| Equipment Dealer(s) | Contact | Telephone No. |
| Lease Terms (Months-Check Box) <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 | Lease Structure <input type="checkbox"/> FMV <input type="checkbox"/> 10% Option <input type="checkbox"/> \$1 OUT | Equipment Cost \$ |

Applicant(s) represents the foregoing information contained in this credit application is true and correct and that Gerharz Equipment, or its designees, may totally rely on same and Applicant(s) hereby authorizes our banks, trade references and other financial institutions to release credit information to Gerharz Equipment, or its designees, even if by fax or copy of this document. Applicant(s) further authorizes Gerharz Equipment, or its designees, to obtain other credit information from all sources including, but not limited to, credit bureau reports on the business and any guarantors as individuals. By signing below, the undersigned individual(s), who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Gerharz Equipment, or its designees (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit and for reviewing or collecting the resulting account. A photostat, facsimile copy or electronic signature of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individuals identified in the above application with the proper authority to act as such. It is further understood and agreed that Gerharz Equipment, may, in its sole discretion, approve or reject this credit application.

Signature: X _____ Print Name: _____ Date: _____

Signature: X _____ Print Name: _____ Date: _____

Signature: X _____ Print Name: _____ Date: _____

Signature: X _____ Print Name: _____ Date: _____

