

Credit Application



Lessee			Vendor				
Legal Bus. Name:			Name:				
Doing Business As:			Address:				
Address:			City, State, Zip:				
City, State, Zip:			Sales Contact:				
Contact:			Telephone:				
Telephone:			Manager:				
Fax:			Service Center:				
Equipment Location (if different than abo	ove):	<u>'</u>					
Business Information							
Type of Business (Check One):	Corporation \Box	Partnership		Proprietorship	☐ Oth	ner:	
Years in Business:	Licensed:	□ No	Type of	License:	Sta	ite Licensed:	
Principals/Guarantors							
Name:			Social Security Number:				
Name:			Social Security Number:				
Equipment To Be Leased		Lease	Struc	cture			
Description:				Term (in Months):			
			Purchase Option:				
Cost:				90 Day Deferred Pr	nts.:	☐ Yes	□ No
The undersigned certifies that the inform individuals whose names appear on the information to Lessor, separately or joint such information are authorized to receiv Agreement. Information about the under undersigned may direct Lessor not to disto Key Equipment Finance, Attn: VP Op NOTICE: If your application for business the statement please contact Key Equipmour decision. We will send you a written Opportunity Act prohibits creditors from a status, age(provided the applicant has the any public assistance program; or becautederal agency that administers compliant Washington, DC 20580.	application expressly autily with other creditors or live and exchange credit in risigned may be used for esclose that information(experations, 600 Travis Streets credit is denied, you have ment Finance at the above statement of reasons for discriminating against create capacity to enter into a use the applicant has in greater and experience.	horize consumed lessors, for use aformation and a marketing and a cept transaction let, Suite 1300 have the right to we address or can the denial with a binding contral cood faith exerci-	er reportiin connecto update administran and explouston, vritten stall 800-87 in 30 day on the basect); beca sed any	ng agencies and othection with this agrees such information a rative purposes and perience information TX 77002. TX 77002. TX 7708 within 60 days of receiving your sis of race, color, reuse all or part of the right under the Con	her perso ement. L is approp shared w n) with Le iffic reason ays from request. ligion, na e applicar sumer Cr	ons to furnish Lessors and journate during the with Lessor's affiliate and for the derection of the date you. The federal Estional origin, sometis income deredit Protection	credit cint users of the term of this affiliates. The the by writing the by writi
Signature:		Title:			Da	ate:	

Fax completed application to (800) 453-0329
For additional information please contact:
Stephen Interlicchio at 800-523-3398