



Lease Application

Legal Name: _____ dba: _____

Business Start Date: _____ Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: _____ Fax: _____ Contact Phone: _____

E-mail: _____ Website: _____

Corporation Partnership
 Proprietor Other _____ Fed ID Number: _____ Type of Business: _____

*Owner: _____ SSN: _____ Title: _____ % Ownership: _____

Address: _____ City: _____ State: _____ Zip: _____

*Owner: _____ SSN: _____ Title: _____ % Ownership: _____

Address: _____ City: _____ State: _____ Zip: _____

If additional space is required, please attach separate sheet

References/Suppliers

Primary Bank: _____ Phone: _____ Officer: _____

Supplier: _____ Phone: _____ Contact: _____

Supplier: _____ Phone: _____ Contact: _____

Financial Information Equipment price > \$25,000

Year 20__ Annual Sales	\$ _____	Year 20__ Income (W-2)	\$ _____
Net Income	\$ _____	Other Income	\$ _____
Assets	\$ _____	Assets	\$ _____
Liabilities	\$ _____	Liabilities	\$ _____

Dealer: Don Allison Equipment Contact: _____ Phone: 800-699-6450

New Used Year: _____ Make/Model _____ Description: _____

Price: \$ _____ Pymt. Frequency: M Q SA A Term: _____ Advance: _____

Purchase Option: 10% 20% \$1.00 Payment: \$ _____ Notes: _____

Address where equipment will be located: _____

Own Rent Landlord Name: _____ Phone: _____

I hereby certify that the above information is correct to the best of my knowledge. I authorize Northland Capital and/or its lenders and assigns to obtain personal credit information on myself and other principals of the organization; and I authorize my banks and creditors to release any and all credit information needed for thorough evaluation. I understand that I may be required to supply additional information.

X _____ X _____ Date: _____

Fax this completed application to: 205-387-1668