

Financing Application for Commercial Customers Phone: 913-962-1830 Fax: 913-273-1523 info@precisionleasing.com

Legal Business Name			Date	
Business Address				
City	State	County	Zi	p
Contact Name	Ві	usiness Phone		
Fax	E-mail			
Business Ownership: Sole Prop Corp Part	LLC F.I.D.# in State of			
Business Start Date:	<u>Ar</u>	nnual Gross Income:		
Owners / Officers / Partners This information may be used to check the personal credit of individuals listed. Please include all principles if company is closely held.				
1) Name	_ Social Security #	Title	Ownership 9	%
Home Street Address	C	ity	State	Zip
Home Phone:	Birth Date	Driver's Lic #		
2) Name	_ Social Security #	Title	Ownership 9	%
Home Street Address		City	State	Zip
Home Phone	Birth Dat		Driver's Lic. #	
Bank Information Bank Name City/State				
PhoneChecking Acct. # Date Opened_				
** Please return your last 3 months commercial bank statements with application (all pages except for copies of checks and deposit slips)				
It is expressly understood that this constitutes an application only and in itself shall not be binding upon either party. Additionally, I / we authorized Precision Leasing, Inc. (and its designee or assignee) to investigate the banks, savings and loan and trade references listed, and if required by Precision Leasing, Inc. (and its designee or assignee), to perform personal credit investigations on the corporate principals, partner or proprietor listed above. By providing a telephone number for a cellular phone or other wireless device, you and any guarantors are expressly consenting to receiving communications at that number, including, but not limited to, prerecorded or artificial voice message calls, text messages, and calls made by an automatic telephone dialing system from Precision Leasing, Inc. and its affiliates and agents. This Express Consent applies to each such telephone number that you provide to us now or in the future and permits such calls regardless of their purpose. These calls and messages may incur access fees from your cellular provider.				
Signature Applicant's Signature Required	Title	Signature		Title
Applicant's Signature Required		Co-Applicant's (if any) S	Signature Required	
Dealer Name / Sales Contact Information/ Terms Requested				
Equipment Dealer/Seller Name:			Contact:	
Phone:	Fax:	Email:		
Equipment description			New or Used (plea	ase circle one)
Sale price \$ Term Requested (in months) 12 24 36 48 60 (please circle terms requesting)				

Financing Provided and Administered by Precision Leasing, Inc., its successors and/or assigns