

A FULL SERVICE EQUIPMENT LESSOR

Please complete the following information and fax it to Barbara Griffith @ (714) 573-9806
She can be reached @ (714) 573-9804 or (800) 291-8777 E-mail: BGriffith@socalleasing.com

Company Information

- Name: _____ Yrs. In Business: _____ Type Of Business _____
- Address: _____ City & State: _____ Zip: _____
- Phone #: _____ Fax #: _____
- _____

Company Structure

- C-Corp: _____ S-Corp: _____ Partnership: _____ Sole: _____

Banking Information

- Bank Name: _____ Phone # _____
- Account #: _____ Type Of Account _____ Contact Person _____

Trade Information/Trade Accounts/Finance or Lease References

- Company: _____ Company: _____
- Contact: _____ Contact: _____
- Phone #: _____ Phone #: _____

Ownership Information

- Name: _____ Title _____ Ownership %: _____ SSN# _____
- Home Address: _____ City & State: _____ Zip: _____
- Name: _____ Ownership %: _____ SSN# _____
- Tentative Equipment: _____ Cost: \$ _____
- Requested Term: 24 Mo. _____ 36 Mo. _____ 48 Mo. _____ 60 Mo. _____

At Southern California Leasing we offer 48hr credit approvals, and custom tailored solutions to address almost any financial need that midsize business may face.

I herby authorize Southern California Leasing and or its nominee to investigate the references herein. All credit information submitted herewith is true and correct.

Signature: _____ Title: _____ Date: _____