

EQUIPMENT LEASING APPLICATION

A. BUSINESS INFORMATION											
Legal/corporate name:				DBA:							
				1							
Physical address:				City:				State: Zi			p:
Business Phone:			F	Fax: Fed			deral Tax ID:				
Г			I				<u> </u>				
Contact:			Er	Email:				Website:			
Business Start Date: Lengt			gth (h of Ownership				Yrs at Location:			# of locations:
B. OWNERSHIP											
Name:				Home Phone:				Cell Phone:			
Γ				T							
Home address:				City:				State:			Zip:
					l						
DOB: SSN:				D/L:			State			State	
		<u> </u>									
% of Ownership: Title:				*If more than o			an on	one owner attach additional sheet			
C. LEASE											
										T 1	
Landlord Name: Work Pho		ne:		Ce	Cell Phone:				Fax:		
Monthly rent:	Sq.F	t:		Lease Dates Start to End:							



EQUIPMENT LEASING APPLICATION (CONT)

D. TRADE SUPPLIES								
Name:	Contact:		Phone:					
Name:	Contact:			Phone:				
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E. BUSINESS PROFILE								
Ownership: Sole Proprietorship Corporation Partnership LLC	d		Cards Accepted: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover					
F. CASH ADVANCE								
Amount requested:		Have you ever used a cash advance?						
Average Visa/Mastercard monthly sa	les:	Company:						
	.							
Avg. Gross monthly sales:	Current balance:							
	T							
Average ticket size:	Holdback %:							



CONSTRUCTION EQUIPMENT APPLICATION (CONT)

OTHER INFORMATION						
Comments:						
H. SIGNATURE						
By signing below, the Merchant and its owners/principals: (1) certify that all information on and documents submitted in connection with this Application are true, correct and complete and (2) authorize THG, its agents, partners, and lenders to receive credit reports and any other information regarding the Merchant and its owners/principals from third parties, in order to verify any information provided on the application.						
Signature:		Date:				