



Phone # (913) 894-4979

Fax # (913) 894-0252

Fill out this quick and easy application form today and we may approve your equipment leasing needs by tomorrow!

LESSOR Important to set out the full legal name of company

Company Name _____

Billing Address _____ Tax ID Number _____

City _____ County _____ State _____ Zip _____

Nature of business _____ Telephone _____ No. of Years in Business _____

Type of Business: ☐ Non-Profit ☐ Proprietorship ☐ Partnership ☐ Corporation No. of Employees _____**PERSONAL INFORMATION** On officers, Partners, or Guarantors

1.) Name _____ Title _____ Social Security No. _____

Home Address _____ City _____ State _____ Zip _____

2.) Name _____ Title _____ Social Security No. _____

Home Address _____ City _____ State _____ Zip _____

By signing & date, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Lessor or its designee and any assignee or potential assignee thereof authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature & date, I/we affirm my/our identity as the respective individual(s) identified in the above application. A \$50 processing fee will be charged in addition to the purchase and delivery cost.

EQUIPMENT TO BE LEASED Attach a separate list if necessary

Qty. _____ Serial # _____ Description _____ Cost _____

Type of Lease (Circle One) _____ Type Of Lease (Circle One) _____

24 36 48 60 5% Buy Out 10% Buy Out 15% Buy Out FIVE year Out \$101 Buy Out

TRADE REFERENCES Important to establish high credit and good payment history

Name of Supplier _____ City/State _____ Telephone _____ Contact _____

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LEASE AND LOAN REFERENCES Six month pay history

Lender _____ Original Amount _____ Account No. _____ Telephone _____ Contact _____

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COMPANY BANK REFERENCES Must have two year history

Name of Bank/Branch _____ Branch _____ Telephone _____

Checking Acct. No. _____ Loan Acct. No. _____ Contact _____

Name of Bank/Branch _____ Branch _____ Telephone _____

Checking Acct. No. _____ Loan Acct. No. _____ Contact _____

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program or because the applicant has good faith exercised in any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law is the Federal Trade Commission Equal Credit Opportunity, Washington, D.C. 20548.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact Lessor as forth above within 60 days from the date you are notified of our decision. We will send you a written statement to reasons for the denial within 30 days of receiving your request for the statement. By signing below, you certify that the statements above and on any attachments are true and complete as of the date given below. You authorize The Hanna Group and any or all other leasing or financing entities or agents to investigate applicant's credit worthiness as may be needed. The undersigned authorizes all banking institutions, credit reporting agencies and its agent to release all necessary information, for the purpose of securing a lease.

Customer Signature _____ Customer Name _____ Title/Date _____

Customer Signature _____ Customer Name _____ Title/Date _____