



10 Day Lily Court • Belle Mead, NJ 08502  
Phone: 800-899-0035 • Fax: 908-359-1202  
www.creativeleasingsolutions.com

## COMMERCIAL LEASE APPLICATION

APPLICANT BUSINESS INFORMATION	COMPANY LEGAL NAME & DBA IF APPLICABLE (PLEASE WRITE BELOW)														
	BILLING ADDRESS		STREET		CITY & STATE		ZIP CODE		COUNTY						
	DELIVERY ADDRESS		STREET		CITY & STATE		ZIP CODE		COUNTY						
	TELEPHONE:		FAX:		EMAIL ADDRESS:										
	CONTACT:				WEBSITE:										
	DATE INCORPORATED:		YEARS IN BUSINESS:		<input type="checkbox"/> PROPRIETORSHIP		<input type="checkbox"/> PARTNERSHIP		<input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC						
	NATURE OF BUSINESS:				FEDERAL TAX ID #										
	GUARANTOR INFORMATION	NAME		TITLE		SS#		HOME PHONE		% OWNED					
ADDRESS															
PREVIOUS ADDRESS (IF LESS THAN TWO YEARS):															
NAME		TITLE		SS#		HOME PHONE		% OWNED							
ADDRESS															
PREVIOUS ADDRESS (IF LESS THAN TWO YEARS):															
BUSINESS BANK INFORMATION		BANK NAME		ACCOUNT #		TELEPHONE		OFFICER		DATE OPENED		<input type="checkbox"/> CK	<input type="checkbox"/> SV	<input type="checkbox"/> CD	<input type="checkbox"/> LOANS
TRADE REFERENCES	FIRM NAME		TELEPHONE		FAX		OFFICER		CITY & STATE		HOW LONG?		HIGH CREDIT		
VENDOR EQUIPMENT INFORMATION	VENDOR NAME:														
	ADDRESS:				CITY & STATE:				ZIP CODE:						
	PHONE		FAX		CONTACT		WEBSITE								
	EQUIPMENT TO BE LEASED:							COST (WITHOUT TAXES)							
	<input type="checkbox"/> NEW <input type="checkbox"/> USED (IF USED, YEAR MANUFACTURED)							LEASE TERMS:				MONTHLY PAYMENT:			

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes Creative Leasing Solutions, Inc. to obtain from third parties, information it deems necessary to arrive at a decision regarding this Application. To help fight terrorism and money laundering, the information you provide will be verified. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes Creative Leasing Solutions, Inc., its designee, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this Application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. The undersigned authorizes all deposit, borrowing, financial and trade information to be released to Creative Leasing Solutions, Inc. by telephone or fax. A photocopy or fax of this authorization shall be valid as the original.

X  
\_\_\_\_\_  
Signature

Print

\_\_\_\_\_  
Date

X  
\_\_\_\_\_  
Signature

Print

\_\_\_\_\_  
Date