

It's As Easy As "1 - 2 - 3"

1.

| | | | | |
|------------------------------------|-------------|--------------------------|----------------|---|
| Customer Full Business Name | | | | |
| Name: _____ | | | | _____ |
| Address: _____ | | | | _____ |
| City: _____ | | ST: _____ | Zip: _____ | |
| Telephone: _____ | | | | _____ |
| Fax #: _____ | | | | |
| Contact: _____ | | Title: _____ | | |
| Cell Number: _____ | | | | |
| Email: _____ | | | | |
| <input type="checkbox"/> | CORPORATION | <input type="checkbox"/> | PROPRIETORSHIP | YEARS IN BUSINESS |
| <input type="checkbox"/> | PARTNERSHIP | <input type="checkbox"/> | L.L.C. | Date Incorporated |
| Federal Tax ID # | | | | |
| | | | | TERM: <input type="checkbox"/> 24 MONTHS <input type="checkbox"/> 36 MONTHS <input type="checkbox"/> 48 MONTHS <input type="checkbox"/> 60 MONTHS |
| | | | | Equipment Cost: \$ |
| | | | | Equipment Description: <input type="checkbox"/> New <input type="checkbox"/> Used |

2.

| | | | | | |
|---|--|--------------|--------------------------------|--|--|
| Personal Information (Officers/Partners) | | | | | |
| Percent of Ownership: _____ % | | | | | |
| Name: _____ | | | Social Security # _____ | | |
| Address: _____ | | | Home Phone # _____ | | |
| City: _____ | | State: _____ | Zip: _____ | | |
| Percent of Ownership: _____ % | | | | | |
| Name: _____ | | | Social Security # _____ | | |
| Address: _____ | | | Home Phone # _____ | | |
| City: _____ | | State: _____ | Zip: _____ | | |

3.

| | |
|----------------------------------|------------------------|
| Business Bank Information | |
| Bank Name: _____ | Account # _____ |
| Contact Person: _____ | Phone #: _____ |

THIS APPLICATION DOES NOT OBLIGATE LESSOR TO ENTER INTO THE LEASE.

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes Advantage I Capital ("Advantage"), or its designee, assigns, or potential assigns to obtain from third parties information it deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes Advantage 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. I authorize all deposit, borrowing, financial and trade information to be released to Advantage its designee, assigns or potential assigns by telephone or fax. A photocopy or fax of this authorization shall be valid as the original.

X
Signature

X
Signature

Please fax back to 610.692.7203