

LEASE APPLICATION

APPLICANT INFORMATION — Corporation "Sub S" Corporation Partnership Proprietorship LLC

FULL LEGAL NAME OF BUSINESS		FEDERAL TAX ID NUMBER		WEBSITE	
BILLING ADDRESS		CITY, STATE, ZIP CODE		COUNTY	
EQUIPMENT LOCATION (If different from above)		CITY, STATE, ZIP CODE		COUNTY	
TELEPHONE NUMBER ()	FAX NUMBER ()	EMAIL ADDRESS:		CONTACT PERSON	
NATURE OF BUSINESS	ANNUAL SALES	STATE OF INCORPORATION/ REGISTRY	NO. OF EMPLOYEES	YEARS BUSINESS IN OPERATION	YEARS UNDER CURRENT OWNERSHIP
HAVE YOU EVER TAKEN BANKRUPTCY? <input type="checkbox"/> No <input type="checkbox"/> Yes – Explain Below		ARE YOU DEFENDANT IN ANY LEGAL ACTION? <input type="checkbox"/> No <input type="checkbox"/> Yes – Explain Below		HAVE YOU EVER HAD ANY ITEM REPOSSESSED? <input type="checkbox"/> No <input type="checkbox"/> Yes – Explain Below	
EXPLANATION:					

PRINCIPALS AND OFFICERS OF BUSINESS

Name	Title	Social Security #	Home Address- City, State, Zip	Home Phone #	Date of Birth	Ownership %

EXISTING BANK ACCOUNTS

NAME OF BANK 1.		BANK OFFICER		TELEPHONE NUMBER ()	
TYPE OF ACCOUNT <input type="checkbox"/> Business <input type="checkbox"/> Personal	ACCOUNT NUMBER	LOAN NUMBER		BALANCE	
NAME OF BANK 2.		BANK OFFICER		TELEPHONE NUMBER ()	
TYPE OF ACCOUNT <input type="checkbox"/> Business <input type="checkbox"/> Personal	ACCOUNT NUMBER	LOAN NUMBER		BALANCE	

EXISTING LEASES, LOANS OR NOTES PAYABLE

NAME OF CREDITOR 1.	CONTACT NAME	ACCOUNT NUMBER	TELEPHONE NUMBER ()	
NAME OF CREDITOR 2.	CONTACT NAME	ACCOUNT NUMBER	TELEPHONE NUMBER ()	
NAME OF CREDITOR 3.	CONTACT NAME	ACCOUNT NUMBER	TELEPHONE NUMBER ()	
Business Property <input type="checkbox"/> Own <input type="checkbox"/> Rent	LANDLORD/MORTGAGE HOLDER	TELEPHONE # ()	MONTHLY PAYMENT \$	BALANCE \$

INSURANCE AGENT

Name:	Agency:	Phone:	Fax:
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INITIAL LEASE REQUEST

Equipment to be Leased:	<input type="checkbox"/> New <input type="checkbox"/> Used	Year _____
What is equipment being used for:		
Approximate Amount: (include equipment quote if available)	Term (months)	

FINANCIAL STATEMENTS

Please include the last three fiscal year-end Financial Statements along with the most recent interim statement. In addition, please provide the most recent Personal Financial Statements on the principal shareholders.

SIGNATURE

The undersigned hereby certifies that the information contained herein is true and correct. National Penn Leasing Company is authorized to make all inquiries it deems necessary in order to determine the credit worthiness of Applicant and Guarantors and forward facsimiles and emails to them until the Lease is completed.

Signature:	Title:	Date:
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