

Lease Credit Application

Vendor/Contractor: _____ Telephone: _____ Contact: _____

LEGAL BUSINESS NAME: _____ **Contact Name:** _____

Type of Business: C-Corp S-Corp Sole Proprietor Partnership Ltd Partnership LLC

Business Address _____ **City, State, Zip:** _____

DBA: (doing business as) _____ **Business Description:** _____

Phone Number: _____ **Fax Number:** _____ **E-mail address:** _____

Federal Tax ID: _____ **State of Incorporation:** _____ **Years in business: (Current Ownership)** _____

Equipment Location Address: _____ **City:** _____ **St:** _____ **Zip:** _____
(If different from business address)

PERSONAL INFO ON OFFICERS, PARTNERS AND GUARANTORS

Officer 1: _____ **Title:** _____ **Owner %:** _____ **SSN:** _____
Home Address: _____ **City:** _____ **St:** _____ **Tel:** _____

Officer 2: _____ **Title:** _____ **Owner %:** _____ **SSN:** _____
Home Address: _____ **City:** _____ **St:** _____ **Tel:** _____

Officer 3: _____ **Title:** _____ **Owner %:** _____ **SSN:** _____
Home Address: _____ **City:** _____ **St:** _____ **Tel:** _____

BANK AND PRIOR LEASE REFERENCES

Bank Name: _____ **A/C #** _____ **Year Account Opened:** _____
Type of Account: _____ **Contact:** _____ **Phone:** _____ **Fax:** _____

Bank Name: _____ **A/C #** _____ **Year Account Opened:** _____
Type of Account: _____ **Contact:** _____ **Phone:** _____ **Fax:** _____

Lease History 1: _____ **A/C #:** _____ **Tel:** _____

Lease History 2: _____ **A/C #** _____ **Tel:** _____

LANDLORD OR MORTGAGE INFORMATION

Landlord: _____ **Contact:** _____ **Tel:** _____

Mortgage Holder: _____ **Contact:** _____ **Tel:** _____

Account Number: _____ **Year Mortgage Opened:** _____

EQUIPMENT DETAILS

Cost: \$ _____ (Do not include sales tax). Please provide a copy of the equipment/work proposal

Term Requested

2 years 3 years 4 years 5 years 6 years Other

I certify the information provided herein is correct, that I am empowered to authorize Trane Leasing, Inc. and/or assigns to make whatever inquiries about us deemed necessary to evaluate our credit application, including contacting banks, trade references and reporting agencies, and that individuals herein named are aware of this request. Should application be declined, I understand that I am entitled to receive written confirmation of the reason why within 30 days of the receipt of my written request.

Owner: _____ **Date:** _____

Owner: _____ **Date:** _____

Owner: _____ **Date:** _____