



Since 1986

* Healthcare
* High Technology
* Broadcasting
* Colleges
* Industry

LEASE / PURCHASE FINANCING APPLICATION

B U S I N E S S	BUSINESS NAME/LESSEE				TELEPHONE	
	ADDRESS (STREET)		(CITY)	(STATE)	(COUNTY)	(ZIP CODE)
	TYPE OF BUSINESS		FAX	YEARS UNDER SAME OWNERSHIP	AGE OF BUSINESS	FED. TAX NO.
	LOCATION OF EQUIPMENT (STREET)		(CITY)	(STATE)	(COUNTY)	(ZIP CODE)

O W N E R S H I P	Business Structure					
	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.
	HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	OWN RENT
	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.
	HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	OWN RENT
	PRINCIPAL'S NAME		TITLE	% OWNERSHIP	HOME PHONE NO.	SOC. SEC. NO.
HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)	OWN RENT	

B A N K S	BANK (& DETAILS IF MERGED LATELY)		BRANCH		YEARS AT BANK	FAX	TELEPHONE
	ACCOUNT UNDER NAME OF		CHECKING ACCT. NO.		CONTACT (& NEW PH. # IF MOVED)		CURRENT BALANCE
	BANK (& DETAILS IF MERGED LATELY)		BRANCH		YEARS AT BANK	FAX	TELEPHONE
	ACCOUNT UNDER NAME OF		CHECKING ACCT. NO.		CONTACT (& NEW PH. # IF MOVED)		CURRENT BALANCE

T R A D E S	COMPANY NAME	ACCOUNT NO.	TELEPHONE NO.	CONTACT PERSON

E Q U I P M E N T	PRIMARY VENDOR		OTHER VENDOR(S)		CONTACT
	ADDRESS (STREET)		(CITY)	(STATE)	(ZIP CODE)
	EQUIPMENT TO BE LEASED				
	COST OF EQUIPMENT		TERMS OF LEASE	FACTOR / PAYMENT	INITIAL INVESTMENT

X	SIGNATURE to OK checking Co. & personal credit bureaus	date
----------	--	------

PHONE / FAX:

800-400-5060 PH

858-451-0400 PH

858-451-0033 FAX

MAILING ADDRESS:

P.O. Box 500110

SAN DIEGO, CA

92150

FEDEX / COURIER ADDRESS:

11835 CARMEL MT. RD.

SUITE # 1304-351

SAN DIEGO, CA 92128

CORPORATE ADDRESS:

11440 W. BERNARDO CT.

SUITE # 300

SAN DIEGO, CA 92127