



1110 Route 109, Suite 10, Lindenhurst, New York 11757-1002
Phone (631)957-7825 • Fax (631)957-7840 0149 • Toll Free (888)737-2825 • www.rerleasing.com

Business Information

Legal Name of Business:		DBA:
Billing Address:		
City:	State:	Zip:
Contact Person:	Title:	Practice Specialty:
Telephone:	Fax:	Years in Business:

Personal Information

Name:	% Ownership:		
Title:	SSN:		
Address:			
City:	State:	Zip:	Telephone:

Business Bank References

<i>Bank Name</i>	<i>City/State</i>	<i>Checking Account #</i>	<i>Telephone</i>
1.			
2.			

Trade References

<i>Supplier's Name</i>	<i>City/State</i>	<i>Contact</i>	<i>Telephone</i>
1.			
2.			

Equipment Supplier Information

Supplier's Name:	Contact:	Telephone:	
Address:			
City:	State:	Zip:	E-mail:

Equipment to be Leased

Description: <input type="checkbox"/> New <input type="checkbox"/> Used	Cost:

Payment Plan

<input type="checkbox"/> 12 months	<input type="checkbox"/> 24 months	<input type="checkbox"/> 36 months	<input type="checkbox"/> 48 months	<input type="checkbox"/> 60 months
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The undersigned individual, recognizing that his/her individual credit history may be a factor in the evaluation of the credit of the applicant, hereby consents to and authorizes the above named business credit provider and any assignee, lender or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim they would otherwise have under Fair Credit Reporting Act in the absence on this continuing consent.

Name/Title

Date