

FAX TO: 443-796-7200

DATE:

LEASE CREDIT APPLICATION

FIRM NAME:			COUNTY WHERE PROPERTY WILL BE LOCATED:		
ADDRESS:		CITY:		STATE:	ZIP:
PHONE	DATE ESTABLISHED:	NATURE OF BUSINESS:		<input type="checkbox"/> PROP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORP <input type="checkbox"/> LLC:	
PRINCIPALS NAME:		POSITION:	% OF OWNERSHIP:	HOME PHONE:	
HOME ADDRESS:		CITY:		STATE:	ZIP:
<input type="checkbox"/> OWNS: <input type="checkbox"/> RENTS:	HOW LONG?	SOCIAL SEC. #	BIRTH DATE:	NAME OF SPOUSE:	
PREVIOUS ADDRESS (IF CURRENT ADDRESS IS LESS THAN 2 YEARS):					
PRINCIPALS NAME:		POSITION:	% OF OWNERSHIP:	HOME PHONE:	
HOME ADDRESS:		CITY:		STATE:	ZIP:
<input type="checkbox"/> OWNS: <input type="checkbox"/> RENTS:	HOW LONG?	SOCIAL SEC. #	BIRTH DATE:	NAME OF SPOUSE:	
PREVIOUS ADDRESS (IF CURRENT ADDRESS IS LESS THAN 2 YEARS):					
EMAIL ADDRESS:		FED ID#	STATE OF INCORPORATION:		

BANK REFERENCE

NAME OF BANK:		PHONE:	PERSON TO CONTACT:	
CHECKING ACCT #	SAVINGS ACCT #		LOAN ACCT:	
NAME OF BANK:		PHONE:	PERSON TO CONTACT:	
CHECKING ACCT #	SAVINGS ACCT #		LOAN ACCT:	

TRADE REFERENCE

NAME OF COMPANY:		ACCOUNT #	PHONE:
NAME OF COMPANY:		ACCOUNT #	PHONE:
NAME OF COMPANY:		ACCOUNT #	PHONE:
CURRENT LEASE OBLIGATION <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME OF CO OR BANK:		PHONE: ACCOUNT:
DO YOU RENT YOUR OFFICE SPACE? <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME OF LANDLORD:		PHONE:

INSURANCE INFORMATION

NAME OF INSURANCE AGENT:			PHONE:
ADDRESS:		CITY:	STATE: ZIP:

EQUIPMENT / VEHICLE VENDOR INFORMATION

NAME:		CONTACT PERSON:		
ADDRESS:			PHONE:	
QTY:	NEW/USED	EQUIPMENT / VEHICLE TO BE LEASED	TERM DESIRED	PRICE WITHOUT TAX

CREDIT LINE INFORMATION

YES, I AM INTERESTED IN AN ADDITIONAL LINE OF CREDIT OF:
 \$25,000
 \$50,000
 \$100,000
 \$ _____

RELEASE

TO WHOM IT MAY CONCERN:

THIS WILL BE YOUR AUTHORITY AND MY REQUEST FOR YOU TO RELEASE TO MADISON CAPITAL, LLC ANY INFORMATION THEY MAY REQUEST CONCERNING CREDIT STANDING WITH YOUR COMPANY AND/OR MONEY ON DEPOSIT. I HEREBY FURTHER AUTHORIZE MADISON CAPITAL, LLC TO OBTAIN ANY AVAILABLE PERSONAL CREDIT BUREAU REPORTS AND UTILIZE PHOTOCOPIES OF THIS RELEASE IN CONJUNCTION WITH THE LEASE APPLICATION PROCESS.

FOR (COMPANY NAME): _____

BY (NAME OF OFFICER): _____ TITLE: _____

SIGNATURE: _____ DATE: _____