

CORPORATE FLEET LEASING

COMMERCIAL LEASE APPLICATION

Fax Application to: 207-846-1174

For assistance call: 207-846-0403

LESSEE INFORMATION:

Legal Name of Company: _____	Federal ID Number: _____
Trade Name: _____	Business Type: Proprietorship: ___ Corp. (S): ___ (C): ___ (LLC): ___
Nature of Business: _____	Street Address: _____
City: _____	State: _____ Zip: _____ County: _____
Business Phone: _____	Cell Phone: _____ Fax: _____ Email: _____
Years in Business: _____	Annual Revenue: _____ # Vehicles in Fleet: _____ Website: _____

PERSONAL INFORMATION (Principals or Guarantors):

<u>Name/Title:</u> _____	<u>Home Address:</u> _____	<u>City:</u> _____	<u>State:</u> _____	<u>Zip:</u> _____

<u>Home Phone:</u> _____	<u>Cell Phone:</u> _____	<u>Email:</u> _____	<u>Social Security#:</u> _____	<u>Date of Birth:</u> _____ <u>Ownership %:</u> _____

BANK REFERENCES:

<u>Bank Name:</u> _____	<u>Branch City / State:</u> _____	<u>Telephone:</u> _____	<u>Contact Person:</u> _____	<u>Account Number:</u> _____

TRADE OR FINANCE REFERENCES:

<u>Company Name:</u> _____	<u>City / State:</u> _____	<u>Telephone:</u> _____	<u>Contact Person:</u> _____	<u>Account Number:</u> _____

CREDIT RELEASE: The undersigned represents that all information provided above is true and correct and hereby authorizes Corporate Fleet Leasing "CFL" to obtain from third parties, information it deems necessary to arrive at a decision regarding this Application. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes CFL, its designee, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this Application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. The undersigned authorizes all deposit, borrowing financial and trade information to be released to CFL by telephone or fax. A photocopy or fax of this authorization shall be valid as the original.

Authorized Signature: _____ **Date:** _____