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# Lease Credit Application

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(Financial Statements may be required on all transactions over \$20,000)

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Full Legal Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Equipment Location: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_ Website: \_\_\_\_\_  
Business Ownership:  Corporation  Partnership  Proprietorship  LLC Fed. Tax I.D. # \_\_\_\_\_  
Type of Business: \_\_\_\_\_ Years of Ownership: \_\_\_\_\_ Corporation Only

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## OWNERS / STOCKHOLDERS

This information may be used to check the personal credit of owners or stockholders.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Address: \_\_\_\_\_ Contact Phone: \_\_\_\_\_  
Street Address City State Zip  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Address: \_\_\_\_\_ Contact Phone: \_\_\_\_\_  
Street Address City State Zip

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## BANKING

Name of Bank: \_\_\_\_\_ Bank Officer: \_\_\_\_\_  
Phone: \_\_\_\_\_ Deposit/Check Acct #: \_\_\_\_\_ Loan Acct. #: \_\_\_\_\_

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## MAJOR TRADE REFERENCES

Supplier's Name: \_\_\_\_\_ Account #: \_\_\_\_\_ Phone: \_\_\_\_\_ Since 19 \_\_\_\_\_

I certify that the above information is correct and I authorize the creditors listed above to provide credit information to Leasing Agent.  
I understand that Leasing Agent may use the provided information to check the personal credit of owners or stockholders.

By: \_\_\_\_\_ Title: \_\_\_\_\_  
Applicant's Signature

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## TO BE COMPLETED BY EQUIPMENT SELLER

Company Name and Address: \_\_\_\_\_

Sales Rep Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Equipment Description: \_\_\_\_\_

Sale Price: \_\_\_\_\_ Term: \_\_\_\_\_ Rate: \_\_\_\_\_ Mo. Payment: \_\_\_\_\_ Purchase Option: \_\_\_\_\_  
Factor (Before Tax)

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