SPEEDYLEASE LLC.

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CREDIT APPLICATION

Fax: 713-396-5273

CONTACT_____

DEALER_

Website: www	v.speadyleasellc.com		PHO	NE		_FAX	
LEESEE INFO	ORMATION:						
Name of Lesse			Years in Business:				
Full Business N	Name:		Nature of Business:				
Billing Address:				City:		State: TX Zip:	
Equipment Location:				City:		State: TX Zip:	
Email Address:			Phone #:		Fax #:		
Federal ID#	Business	rporation [
Ever Filed for Bankruptcy: YES NO Number of Employess: Average Monthly Revenue:							
Principal's Name:				Social Security #			
Home Address:			Home Phone:				
Partner's/Guarantor's Name:			Social Security #				
Home Address:				Home Phone:			
FOURMENT	DEINO I FACED						
EQUIPMENT BEING LEASED Quantity Equipment Description, Manufacturer & Model Number				I.D. or Serial#			
Equipment Description, Manadataret & Model Names				i.b. of Genam			
	I				l		
LEASE TERMS							
Total Equipment Cost: \$ Terms:					Rate	Factor Used:	
			eposit (no. of months): Other:				
PURCHASE OPTION: Fair Market Value (FMV) \(\square\) \$1.00 \(\square\) OTHER \(\square\)							
BANK REFERENCES							
Bank Name:			Bank Name:				
Contact: Phone:			Contact: Phone:				
Address:			Address:				
Account Number			Account Number				
TRADE REFE	ERENCES						
Name:			Name:				
Contact: Phone:			Contact: Phone::				
Address:			Address:				
porting agencie that their indivi lessor(s) to inv time to time in	rize lessor to gather information from es for the sole purpose of determinir dual credit histories may be a factor restigate their personal credit status. the credit evaluation and collection H TAX EXEMPTION CERTIFICATE (IF APF	ng an open in the eval This includ processes.	line of cre- uation of the des obtaini	dit. The Owners/P he lease applicant ing and using their	artne and, t consi	r/Guarantors recognize thus authorize the umer credit reports from	
CUSTOMER SIGNATURE			TITLE			DATE	