



Larry Nemeth
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EQUIPMEN INFORMATION

Equipment Description: Cost: \$ Year: Make: Model:

VENDOR INFORMATION

Vendor Name:

Vendor Address: City: State: Zip:

Contact Person: Telephone Number:

LESSEE COMPANY INFORMATION

Company Name: Time In Business:

Company Address: City: State: Zip:

Signer: Title: Telephone: Fax: Cell:

Nature of Business: Emil Address:

PERSONAL INFORMATION ON OFFICERS, PARTNERS, OR GUARANTOR'S

Name: Title: Social Security Number:

Home Address: City: State: Zip: Home Phone:

Name: Title: Social Security Number:

Home Address: City: State: Zip: Home Phone:

COMPANY BANK REFERENCES - TWO YEARS

Name of Bank and Branch: Telephone: Contact Officer:

Checking Account Number:

Name of Bank and Branch: Telephone: Contact Officer: :

Checking Account Number:

TRADE REFERENCES - TWO YEARS

Name of Supplier: Account#: Telephone: Contact:

Name of Supplier: Account#: Telephone: Contact:

Name of Supplier: Account#: Telephone: Contact:

By signing below, the undersigned individual, as principal of and/or guarantor for the applicant, authorizes First Pacific Funding, its designee, assigns or potential assigns, to review his/her personal credit profile provided by national credit bureaus in considering this application and for the purpose of the update, renewal, or extension of credit to the applicant or the collection of any resultant accounts. A fax or photocopy of this authorization shall be valid as the original.

Signature _____ Signature _____