



financial services

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BUSINESS INFORMATION

Exact Legal Business Name (include DBA name if applicable): Telephone:
Business Address: County: Years in Business: Federal ID No.:
City/State/ZIP: Description of Business: Contact:
Cell Phone:
Email Address:
Location of Equipment: Proprietorship Partnership: Corporation S Corp LLC C Corp
State of Incorporation: Date of Incorporation: State ID #:
Insurance Co.: Telephone: Address:

OWNERSHIP / OFFICER

Principal/Officer: Home Address: Soc. Sec. #: Phone:
Title: % Owned:
Principal/Officer: Home Address: Soc. Sec. #: Phone:
Title: % Owned:
Principal/Officer: Home Address: Soc. Sec. #: Phone:
Title: % Owned:

BANK REFERENCES

Table with 6 columns: Bank Name, Location, Phone, Account #, Contact, Type of Account. Includes sub-headers for Cking, Sving, Loan, Other.

FINANCING / TRADE REFERENCES

Table with 4 columns: Name, Telephone, Contact, Address

EQUIPMENT & SUPPLIER INFORMATION

Supplier Name: Telephone: Cost:
Contact: Term: Buyout: \$1 10% FMV
Equipment:

I (We) authorize Security Leasing Services, Inc. and/or its assigns and designees to investigate all credit information, including but not limited to consumer credit reports, bank and trade references and accountant information for purposes of processing this lease credit application.

Authorized signature: Title: Date:
Authorized signature: Title: Date:
Authorized signature: Title: Date: