



Application

Return to

Fax to 937-473-5990

LESSEE / APPLICANT INFORMATION				
Legal Business Name or Farm Name				Phone
Address (Street, R.R. - no PO Box)				E-mail
City	County	State	Zip	Cell Phone
Type of Business or Farm	Livestock Type & # of Head			Contact Name
Corp <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Prop <input type="checkbox"/>	Federal Tax ID #			Date Established/Time in Business
# of Acres owned	# Rented Acres	Farm Gross Annual Income	Non Farm Annual Income	Sales Tax Exempt? <input type="checkbox"/> Yes <input type="checkbox"/> No

PRINCIPAL INFORMATION (President, Owner or Partners)			
Name 1	Title	% of Ownership	Social Security #
Home Address	City	State	Zip
Home Phone			
Name 2	Title	% of Ownership	Social Security #
Home Address	City	State	Zip
Home Phone			

ASSETS & LIABILITIES INFORMATION	
Cash on Hand/Savings:	Total Liabilities:
Total Assts:	Total Net Worth:

VENDOR / EQUIPMENT INFORMATION			
Name	Phone	Contact	
Address	City	State	Zip
Fax			
Equipment To Be Leased - Description			
<input type="checkbox"/> Used <input type="checkbox"/> New	Term (months)	Payment Type (circle one) Monthly – Quarterly – Semiannual - Annual	Trade In <input type="checkbox"/> Yes <input type="checkbox"/> No
Total Equipment Cost (Before Trade)			

All information in this application and all attachments is correct to the best of my knowledge. I authorize verification of employment and all financial and other information submitted with this application, including obtaining a credit report, to act on this application. I authorize making continued inquiries about such information and obtaining a credit report during the term of my lease(s) as necessary to administer my lease(s). As required by law, my identity will be verified. I authorize all past or present creditors to release any and all necessary credit information, and to respond fully to requests for information based on this application when transmitted by electronic or other means. I authorize any lessor making a lease applied for hereby to disclose to you, on a confidential basis, my personal, credit and other information (including without limitation post-closing information regarding the servicing of the lease and any defaults thereunder), whether or not you are a servicer of the lease.

The above permissions and authorizations will apply to any creditor to whom this application is submitted. I certify that the lease(s) applied for hereunder are for business, commercial or agricultural purposes and not for personal, family or household purposes. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. A number of federal agencies share enforcement responsibility for this law. Determining which agency to contact depends on the type of creditor you dealt with. Consult the creditor to whom this application is addressed for information on its regulator, or contact The Federal Trade Commission, Consumer Response Center, Washington, D.C. 20580, 1-877-382-4357.

Signature #1: _____ Date _____ Signature #2: _____ Date _____