



# EQUIPMENT LEASE CREDIT APPLICATION

INTERNAL USE  
App #: \_\_\_\_\_  
Sales Rep: CAROLE HENDRY

www.marlinleasing.com

Northeastern Division • 300 Fellowship Road • Mount Laurel, NJ 08054 • phone: 888.479.9111 • fax: 888.479.1100  
Lease Acceptance Office • 520 Walnut Street, Suite 1150 • Philadelphia, PA 19106 • phone: 800.479.9111 • fax: 800.303.9545

The business equipment you are acquiring can be leased (subject to acceptance by Marlin) under the following terms:

TOTAL EQUIPMENT COST: \$ \_\_\_\_\_ Term: \_\_\_\_\_ mos. Rate Factor Used: \_\_\_\_\_

Monthly Payment (plus applicable taxes): \$ \_\_\_\_\_ Purchase Option: \_\_\_\_\_

Advance Rentals: \$ \_\_\_\_\_ Security Deposit: \$ \_\_\_\_\_ Other: \_\_\_\_\_

## EQUIPMENT BEING LEASED (include quantity, make, model, serial number and accessories)

CHECK HERE IF EQUIPMENT IS USED:

Equipment Location (if different than below.) \_\_\_\_\_  
Street City County State Zip

## LESSEE INFORMATION

MAY WE CONTACT LESSEE IF ADDITIONAL INFORMATION IS NEEDED?  YES  NO

Full Legal Business Name: \_\_\_\_\_ Contact Name \_\_\_\_\_

Address: \_\_\_\_\_  
Street City County State Zip

E-Mail: \_\_\_\_\_ Internet Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Federal Tax ID #: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Years of Ownership: \_\_\_\_\_

State of Incorporation/Organization: \_\_\_\_\_ Business Type:  Corp.  Limited Liability Corp.  Partnership  Proprietorship

## OWNERS, PARTNERS OR GUARANTORS

1) Name: \_\_\_\_\_ Title: \_\_\_\_\_ SS#: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

2) Name: \_\_\_\_\_ Title: \_\_\_\_\_ SS#: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

## BANK INFORMATION

Name of Bank: \_\_\_\_\_ Bank Officer: \_\_\_\_\_

Phone: \_\_\_\_\_ Deposit/Check Acct #: \_\_\_\_\_ Loan Acct. #: \_\_\_\_\_

Name of Bank: \_\_\_\_\_ Bank Officer: \_\_\_\_\_

Phone: \_\_\_\_\_ Deposit/Check Acct #: \_\_\_\_\_ Loan Acct. #: \_\_\_\_\_

## TRADE REFERENCE

Name of Supplier: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## VENDOR INFORMATION

DEALER GROUP CODE: \_\_\_\_\_

Name: Boelter Companies Contact: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City County State Zip

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

The person(s) supplying the above information certifies to Marlin Leasing Corporation that it is true and correct. The Owners/Partners/Guarantors recognize that their individual credit histories may be a factor in the evaluation of the lease applicant and, thus, authorize Marlin Leasing Corporation and/or its affiliates and designees to investigate their personal credit status. This includes obtaining and using their consumer credit reports from time to time in the credit evaluation and collection processes as well as for the extension of credit relating to other products and services.