



31726 Rancho Viejo Road, Suite 205,
San Juan Capistrano, California 92675
www.pacifica-capital.com
larryt@pacifica-capital.com

Equipment Lease Application

Attn.: Larry Turner - Ext. 229

760.599.4757 Telephone

619.838.3000 Mobile

800.800.8081 Toll free

760.295.2499 Facsimile

Company Information												
Company Name				Telephone		Ext.		FAX				
Billing Address				City		State		Zip				
Contact Person			Title		Federal Tax ID Number			Time Under Current Ownership				
Nature of Business					State Incorporated			Organization ID#				
Company Website				E-mail address								
Physical Equipment Location (if different from above)			City		State		Zip		Type of Business <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership	<input type="checkbox"/> Non-Profit <input type="checkbox"/> LLC	
Principal Information												
Principal #1 Name			Title			Ownership %		Social Security Number				
Home Address			City		State		Zip		Home Phone			
Principal #2 Name			Title			Ownership %		Social Security Number				
Home Address			City		State		Zip		Home Phone			
Banking Relationships												
Name of Bank/Branch		How Long?		Account Number		Telephone		Contact Person				
Name of Bank/Branch		How Long?		Account Number		Telephone		Contact Person				
Trade Relationships / Lease & Loan References												
Term Debt/Leases		City		State		Account Number		Telephone		Contact Person		
Term Debt/Leases		City		State		Account Number		Telephone		Contact Person		
Trade Reference		City		State		Account Number		Telephone		Contact Person		
Landlord/Mortgage Holder Business Location			City		State		Zip		Telephone		Contact Person	
Equipment Information												
Vendor Name			Vendor Telephone		Vendor Fax		Contact person					
Address			City			State		Zip		Total equipment Cost \$		
Description of Equipment <input type="checkbox"/> New <input type="checkbox"/> Used										Model Year (if used)		
Requested Terms												
Number of Months:		<input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60						Budgeted Payment?				
Purchase Option:		<input type="checkbox"/> \$1 buy-out <input type="checkbox"/> 10% <input type="checkbox"/> FMV						\$				

Signature (Required) _____ Date _____

Print Name _____ Title _____

**Please Fax to
(760) 295-2499**

Lessee certifies that all credit and financial information is true and correct and authorizes Lessor and/or any prospective assignee/creditor to investigate Lessee's credit worthiness and disclose information and investigation results to each other. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit or additional credit and for reviewing and collecting the resulting account. I understand that I have the right to a written statement of reasons if my application is declined and I ask for such a statement. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, creed, sex, or marital status. Lessee gives permission to lessor to transmit this application via the internet, if such transmission is required as part of the application process.



Credit Authorization

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By signing below, the undersigned individual, who is either a principal of the credit applicant or a guarantor of it's obligations, provides this written instruction to Pacifica Capital, it's nominees or assigns, authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in consideration of this application and subsequently for the purpose of update, renewal or the extension of such credit or additional credit and for reviewing and collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm our identity as the respective individuals identified in the related application.

Applicant: _____

Print Name:			
Signed:		Date:	
Title:		Social Security #:	

Print Name:			
Signed:		Date:	
Title:		Social Security #:	

Note: Use full legal name(s). Signature(s) must be only those duly authorized corporate officer, partner or proprietor, with title indicated.

This authorization also permits Pacifica Capital to obtain personal bank checking and/or loan account ratings if provided by applicant.