		LESSEE INF				
Company						
Address						
Telephone						
Nature of Business:						
Location □ Own □ Rent	Sq. Ft.: Landlord:			_Telephone	•	
Structure of Business:	C Corp S Corp		Partnership	Proprietors	hip Non Profit	
State of Corporation (if a	applicable)		Corpor	ate ID #		
Descriptions			OF EQUIPMEN	Т		
Description:				lankana		
Vendor:						
Price of Equipment (Exclu						
PER	SONAL INFORMAT	ION ON OFFIC	ERS, PARTNE	RS, OR GUA	ARANTORS	
Name:	Title:		Soc. Sec. #		Birth Date:	
Home Address:		City	St	Zip	Phone	
Name:	Title	;	Soc. Sec. #	<u> </u>	Birth Date:	
Home Address:		City	St	Zip	Phone	
		BANK REF	ERENCES			
Name of Bank:		Contact:		ione:	Fax:	
Checking Account #:		Loan Account	#:			
Name of Bank:	NATION AND AND AND AND AND AND AND AND AND AN	Contact:		hone:	Fax:	
Checking Account:	L	oan Account _				
Current Lease Obligation:	☐ Yes ☐ No Name	e of Co./Bank: _		Account	t #:	
		INSUR	ANCE			
Agent's Name:		Contact:		Pho	one:	
Address:		City	/State/Zip:			
		TRADE REI	FERENCES			
Name of Supplier:		Phone:		_ Fax:		
Name of Supplier:		Phone:		_ Fax:		
		Phone:		_ Fax:		