Lease Credit Application

Fax Application to: 585-869-7739 Attention Jim Swetman – Home Power Systems

Information About Your Company

Applicant's Signature

Company Legal Name:		Federal ID. #			
Address:	Ci	ity:	State:	Zip:	
County: Tel: () Fax: ()	Contact:	Title:	
Time In Business Under Current C Equipment Will Be Located At:				le Prop.() Non-Profit Corp.	
What Is The Nature Of The Busine	ss:		Web/Email Address:		
Information On The Officers,	Owners, Or Partners (plea	ase use	an attachment if there are	more than two)	
Name:	T	itle:	SS#:	Ownership %:	
Address:	City:		State: Zip:	Tel: ()	
Personal Net Worth Excluding Bus					
Name:	T	itle:	SS#:	Ownership %:	
Address:	City:		State: Zip:	Tel: ()	
		Personal Net Income \$			
Business Banking Information	<u>1</u>				
Name Of Bank:	Tel: ()	Contact Office	r:	
Account #(S):					
Name Of Bank or Financing Refer	ence:	T	el: ()	Contact:	
Account #(S):	Loan	#:	A	Appx. Opening Date:	
Business Credit References (S	-		•		
Name:			Contact:		
Name:			Contact:		
Name:	Tel: ()		Contact:	Acct. #	
Describe What You Are Leasing B	elow or Attach A Quotation	(Pl	ease specify)NEW or _	Used Age if Used:	
Total Equipment Cost: (before sal	es tax) \$				
Number Of Lease Payments	Months. Purchase Option	on:	Advance Pa	yments:	
Equipment Supplier or Vendo	<u>r</u>				
HOME POWER SYSTEMS 1-760-B CANNING PARKWAY			owersystems.net		
I hereby authorize our banks, trade referenthat this application will remain in possession herby authorize future inquiries necessary attachments/exhibits are valid and correct t	whether credit is granted or not and that for any purpose related to our credit t	a report of	r reports may be requested from various cr	edit reporting agencies. I also	
v	Title		Date:		