



822 Hartz Way, Suite 212A, Danville, CA 94526

# LEASE APPLICATION

**Fax completed and signed application to: 925-837-2268**

Website: **www.capxfunding.com**  
 Questions? Please call **866-914-2279**

## Customer Information

Legal Company Name	Contact Person	Phone #	
Address	City, State, Zip	Fax #	
Location of Equipment (if different from above)	City, State, Zip	Email Address	
Federal Tax ID#	Type of Business	Number of Employees	
<b>Choose one:</b> C-Corp___ S-Corp___ LLC___ Proprietorship ___ Partnership ___		Year Company Started	# Years Owned

## Equipment Information

Supplier/Vendor/Dealer	Representative	Representative's Phone #
Equipment Description	Equipment Cost	Sales Tax Rate for <u>Equipment Location</u>
New ___ or Used ___ Year ___	Requested Term ___ months	Business Facilities Owner & Phone #

## Reference Data

List present bank(s). Previous bank is required if applicant has been at present bank less than two years.

<b>Present Bank</b>		<b>Finance/Leasing Reference</b>	
Branch	Phone	Location	Phone
Bank Contact	Account Number	Contact	Account Number

## Trade References

Name and Address	Phone	Contact Name
1.		
2.		

## Personal Data for All Owners and Guarantors

(attach separate application for additional Owners and Guarantors)

Name	Title	Ownership %	Date of Birth
Home Address <input type="checkbox"/> Own <input type="checkbox"/> Rent	City, State Zip	Social Security Number	
Name (attach additional owners/guarantors)	Title	Ownership %	Date of Birth
Home Address <input type="checkbox"/> Own <input type="checkbox"/> Rent	City, State Zip	Social Security Number	

Credit Authorization: I/We hereby authorize CapX Funding Corp., its designee, assigns or potential assigns to review my/our personal credit profile provided by national credit bureaus in considering this application and for the purpose of updating, renewing, extending additional credit or the collection of any late account. I/We hereby authorize our references to release all credit information and I/We represent and warrant that the information submitted herein is true, complete and accurate. I/We also agree to furnish financial statements and/or tax returns upon request. A facsimile, electronic or other copy of this authorization shall be as valid as the original.

**X** \_\_\_\_\_ **Title** \_\_\_\_\_ **Date** \_\_\_\_\_