



BEAUTY SPA EXPO

Your Ultimate Source for Pedicure Spa, Salon Furniture & Beauty Equipment

EQUIPMENT LEASE APPLICATION

Lease Line: (714) 775-17770

Fax Line: (714) 775-1782

VENDOR INFORMATION

Vendor Name: _____ Vendor Code: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Tel No.: () _____ Fax No.: () _____ Contact: _____

EQUIPMENT INFORMATION

Description: _____ Equip. Cost: _____
 () New () Used Lease Term: _____ Buyout: () FMV () 10% () \$1 () Other: _____

LESSEE INFORMATION

Full Legal Name: _____ DBA: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Years In Bus.: _____ No. of Employees.: _____ Contact Person: _____ Title: _____
 Nature of Business: _____ Telephone: _____ Fax No. _____
 Business Type: () Corp. () Prop. () Partner () Non-Profit () LLC Tax ID # _____

PERSONAL INFORMATION

Officer: _____ Social Security #: _____ Title: _____
 Address: _____ City: _____ State: _____ Zip: _____ Home Tel: _____
 Officer: _____ Social Security #: _____ Title: _____
 Address: _____ City: _____ State: _____ Zip: _____ Home Tel: _____

TRADE REFERENCES

Name: _____ Telephone #: () _____ Contact: _____
 Name: _____ Telephone #: () _____ Contact: _____
 Name: _____ Telephone #: () _____ Contact: _____

BANK INFORMATION

(Two Year History)

Bank Name: _____ () Checking () Savings () Loan
 Telephone: () _____ Contact Name: _____ Acct. #: _____
 Bank Name: _____ () Checking () Savings () Loan
 Telephone: () _____ Contact Name: _____ Acct. #: _____

By signing below, each undersigned individuals(s), who either a principle of the credit applicant listed below, or a personal guarantor of its obligations, provides written instruction to Lease One or its designee (and any assignee or potential assignee thereof) authorizing review of his or her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the application of the credit applicant and subsequently for the purposes of update renewal, or extension of such credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be as a valid original. In addition to authorizing review of my/our credit profile from any national credit bureau the undersigned also authorizes my/our financial institutions and creditors to release credit information required by Lease One or its designee (and any assignee or potential assignee thereof.)

 DATE SIGNATURE TITLE

 DATE SIGNATURE TITLE