

BUSINESS Exact Legal Business Name			Phone Number		Fax Number		
Billing Address			City		State	Zip Code	
Dilling Address			Oity		otate		
Equipment Address (if different than billing)			City		State	Zip Code	
Type of Business			Federal ID	D#:	County		
	Business Age Years Owned by (in years) Current Owner		Annual Sales		Number of Employees		
Primary Contact Nam	e		Phone		Ext	_Fax	
Title	CellEmail				Website		
Business Structure:	Proprietorship	Corporation	LC Partne	ership Othe	r		
OWNERSHIP							
Principal's Name		Title	<u> </u>	SSN		_Phone	
Home Address		City_		State	Zip Code	% Ownership	
Principal's Name		Title	•	SSN		Phone	
Home Address		City_		State_	Zip Code	% Ownership	
Rank		City	State	Contact Na	me	Phone	
Darik			otate_	Contact Nai	<u>.</u>	T HONE	
EQUIPMENT							
Equipment Description	ipment cription				XIS		
Term ☐ 24 months ☐ 36 months ☐ 48 months ☐ 60 months				City		State	
Equipment Cost				Contact			
				Phone		Ext	
1	authorize Advanta	age+ (Advantage	Leasing Cor	rporation) to i	nvestigate my cr		
Signature	/Title:			Date			
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Signature	/Title:			Date			