

Residential Customer Credit Application

First Name			
Middle Name			
Last Name			

Street Address			
City, State, Zip	City	State	Zip

Social Security #			
Home Phone #		Cell Phone #	
Email Address		Work #	

How long living at current address	_____ years
Do you own your house	Yes <input type="checkbox"/> No <input type="checkbox"/>

Equipment Information			
Supplier Name	_____		
Contact Person	_____	Phone Number	_____
Email	_____	Fax Number	_____
Address	_____		
Approx. Price	\$ _____	Condition	_____ New _____ Used
General Description	_____		

Credit Authorization

The undersigned applies for the Lease indicated in this application. Everything stated in this application is correct. First Capital Equipment Leasing Corporation may retain the application whether or not the Lease is approved. First Capital Equipment Leasing Corporation and its authorized affiliates are authorized to check my credit for the purposes of determining my credit worthiness at the time of my application or thereafter in connection with the same transaction or extension of credit and for the further purpose of reviewing the account, taking collection activity on the account, and skip tracing. First Capital Equipment Leasing Corporation and its authorized affiliates are authorized to provide history information to others about my credit standing and your credit experience with me, including but not limited to credit bureaus, other companies, outside collection agencies and outside attorneys.

Applicant Signature	X	Date	
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