



**Credit Fax 888-375-3288**

**Company Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **Phone** \_\_\_\_\_

**City** \_\_\_\_\_ **County** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Attention** \_\_\_\_\_ **Title** \_\_\_\_\_ **Years in Business** \_\_\_\_\_

**Description of Business** \_\_\_\_\_ **Fed ID #** \_\_\_\_\_  Corporation  Partnership  Proprietorship  
*(Required Information)*

<b>BANKS</b>	<b>Name</b>	<b>Telephone</b>	<b>Account Number</b>	<b>Account Officer</b>
1.	_____	_____	_____	_____

<b>CREDIT &amp; TRADE REFERENCE</b>	<b>Name</b>	<b>Contact</b>	<b>Telephone</b>
1.	_____	_____	_____

2. \_\_\_\_\_

**If individually owned, a partnership or a closely held corporation, please include and complete the following:**

<b>Name</b> _____	<b>S.S.#</b> _____	<b>Date of Birth</b> _____	<b>Telephone</b> _____
<b>Address</b> _____	<b>City</b> _____	<b>State</b> _____	<b>Zip</b> _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own
<b>Name</b> _____	<b>S.S.#</b> _____	<b>Date of Birth</b> _____	<b>Telephone</b> _____
<b>Address</b> _____	<b>City</b> _____	<b>State</b> _____	<b>Zip</b> _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own

I/We have applied to finance equipment. I authorize Wells Fargo Equipment Finance, Manufacturer Services Group to investigate the references listed above or other credit data including reports from credit reporting agencies which may be required as part of its normal credit approval procedures and authorize that any such information requested may be released by telephone. **NOTICE: Wells Fargo Equipment Finance Manufacturer Services Group complies with Section 326 of the USA PATRIOT Act. This law mandates that we verify certain information about you while processing your lease application.**

Authorized this \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_\_  
Signature \_\_\_\_\_ Title \_\_\_\_\_

**DESCRIPTION OF EQUIPMENT TO BE LEASED**

Quantity	New/Used	Model - Description	Unit Cost	Total Cost

Lease Term _____	Lease Rate Factor _____	<b>TOTAL COST</b>	
Purchase Option _____	Number of Advance Payments _____		<b>Less Trade In Allowance</b>
			<b>Net to Finance</b>

Lease Payment	\$ _____
+ Maintenance Payment	\$ _____
= TOTAL Payment	\$ _____

**Tax Rate** \_\_\_\_\_

**Dealer** \_\_\_\_\_ **Salesperson** \_\_\_\_\_ **Phone** \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Fax \_\_\_\_\_

**APPLICANT - DETACH AND RETAIN**

*Creditor's Name: Wells Fargo Equipment Finance, Manufacturer Services Group*  
If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Wells Fargo Equipment Finance, Manufacturer Services Group Attn: Credit Manager, 300 Tri-State International, Suite 400, Lincolnshire, IL 60069 or (800) 570-3607 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request.

*Creditor's Address: 300 Tri-State International, Lincolnshire, IL 60069*

**NOTICE:** The Federal Equal Credit Opportunity Act prohibits creditors from discrimination against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Credit Protection Act (15 U.S.C. 1601 et seq.). The Federal agency that administers compliance with this law concerning this creditor is the Comptroller of the Currency, Customer Assistance Group, 1301 McKinney Street, Suite 3450, Houston, TX 77010-9050. Wells Fargo Equipment Finance, Manufacturer Services Group, is a division of Wells Fargo Bank, N.A.