



VENDOR NAME _____

Business Information

Business Name _____

DBA _____

Address _____ City _____ State _____ Zip _____

Corporation _____ Partnership _____ Sole Proprietorship _____

Type of Business _____ Age of Business _____ Federal ID# _____

Bank Name _____ Routing# _____ Account# _____

Bank Phone# _____ Contact Person _____

Dunn & Bradstreet Rated? _____ If Yes please list DUNS _____

Equipment Description _____ Payment _____ Term _____

PERSONAL INFORMATION

Owner/Officer _____ Title _____

Home Address _____ City _____ State _____ Zip _____

Home Phone# _____ Date of Birth _____

Social Security# _____ Drivers License# _____

Do You Own Your Home _____ How Long? _____

Yearly Business Income _____ Additional Income _____

Home Email _____ Alternate Work# _____

I hereby certify that all the information provided is true and correct. For this purpose Executech Lease Group has my permission to obtain my credit report from credit bureaus and or credit agencies.

Signature of Applicant _____ Date _____