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# enterprisingcapital

## Lease Application

Company \_\_\_\_\_  
 DBA (if different) \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Federal tax ID \_\_\_\_\_ Social Security \_\_\_\_\_  
 Amount of Credit Desired: \_\_\_\_\_

## Banking Reference

Bank: \_\_\_\_\_ Account: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact: \_\_\_\_\_

## Trade References

Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Contact: \_\_\_\_\_

## Company Ownership

Type of Company:  Corporation  Proprietorship  Partnership  LLC  
 Time in Business: (under current ownership) \_\_\_\_\_ Years  
 Annual Revenue \$ \_\_\_\_\_

Owner 1: \_\_\_\_\_ SS# : \_\_\_\_\_ % Owned: \_\_\_\_\_ Title: \_\_\_\_\_  
 Home address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Owner 2: \_\_\_\_\_ SS# : \_\_\_\_\_ % Owned: \_\_\_\_\_ Title: \_\_\_\_\_  
 Home address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Owner 3: \_\_\_\_\_ SS# : \_\_\_\_\_ % Owned: \_\_\_\_\_ Title: \_\_\_\_\_  
 Home address: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby certify that the information contained in this file is true and accurate to the best of my knowledge, By submitting this form, I authorize our banks, trade references, credit reporting agencies, and other financial institutions the right to release credit information.

Signature \_\_\_\_\_  
 Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Date \_\_\_\_\_

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## RELEASE AUTHORIZATION

The undersigned represents that all information provided is true and correct, and hereby authorizes **Kevin Michael Cunningham d/b/a Enterprising Capital** to obtain from third parties information it deems necessary to arrive at a decision regarding this Application. The undersigned individual(s), authorizes **Kevin Michael Cunningham d/b/a Enterprising Capital** or its designees, assigns or potential assignees, to review a personal credit profile provided by a national credit bureau for the purpose of considering an application, credit update, renewal or extension of credit. I authorize all deposit, borrowing, financial and trade information to be released by telephone, fax or email. A photocopy or fax of this authorization shall be valid as the original.

Signature \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_