

33!Celebrating 33 Years
April 4, 2018

First Capital Equipment Leasing Corp.

LeaseExperts.comTM

Experienced, Knowledgeable, Competitive & Fast!

Questions Call 800-541-0114 x-17 • Submit To: Credit@LeaseExperts.com or Fax To: 508-833-6692**RELIGIOUS ORGANIZATION CREDIT PROFILE**

Name of Organization (Incorporation Name): _____

Phone _____ Fax #: _____ Website: _____

Address: _____

Are you incorporated? _____ If yes, what State? _____ Date Started: _____

Federal Tax ID #: _____ Sales Tax Exempt: Yes _____ Fax certificate _____

What is your national affiliation: _____ Number of members: Active _____ Contributing _____

Business structure governing body? (Deacons, Elders, Bishops, Board etc.) _____

Weekly collections: \$ _____ Current year's budget: \$ _____ Last year's budget: \$ _____

Number of Paid Employees: Full _____ Part Time: _____

Business/financial decision maker's name/title? _____ Title: _____

Mortgage holder name/phone number? _____ Phone: _____

Does the organization operate any other businesses here? _____

REFERENCESBank account from which invoices will be paid. *(Fax the last 3 months bank statements)*

Bank Name: _____	Acct #: _____
Phone: _____	Contact: _____
Loan/Lease Ref: _____	Phone: _____
Contact: _____	Acct #: _____
Landlord/Mortgage Holder: _____	Email: _____
Contact: _____	Phone: _____

EQUIPMENT AND TERMS

Equipment to be leased: _____ Amount of Request: \$ _____

Equipment Vendor: _____ Contact: _____ Phone: _____

Term in months: 24 36 48 60 Purchase Option: \$1.00 or 10% Monthly Payment: \$ _____

CREDIT AUTHORIZATION

By signing below, the undersigned individual (s), who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to First Capital Equipment Leasing Corporation or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau and/or from any bank or trade reference provided herein. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal, or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be valid as the original. I/we authorize First Capital Equipment Leasing Corp. to communicate with me/us using any fax numbers and email addresses provided. **Further, I/we affirm my/our identity as the respective individual/s identified in the above application and that all of the information contained herein is accurate, true, and complete.**

Corporate Officer Print Name: _____ Title: _____

Day Phone # _____ Home # _____ Cell # _____

E-mail: _____ Sign Here: _____

For Quick Approval Include: 1) Signed application, 2) Last 3 Months Bank Statements, 3) Tax Exempt Certificate, 4) Equipment Quote, 5) Signed Lease Quote