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BUSINESS INFORMATION

Business Name:		Phone Number:	
Business Address:			
City:		State:	ZIP Code:
DUNS Number:	Tax ID Number:	Nature of Business:	
Date Of / /	<input type="checkbox"/> Incorporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Proprietorship
Yrs. Est.:	Yrs. Under Present Ownership:		
Name of Driver of Vehicle:			
Garaging Address:			
City:		State:	Zip:

OFFICERS

First Name:	Last Name:	Title:	% Own:

PERSONAL GUARANTOR/CO-APPLICANT INFORMATION

Name (Last, First, MI):			
Date of birth:	SSN:	Phone:	
Current address:			
City:		State:	ZIP Code:
Own <input type="checkbox"/> Rent <input type="checkbox"/> (Please check)	Monthly payment or rent:	How long?	
Previous address:			
City:		State:	ZIP Code:
Owned <input type="checkbox"/> Rented <input type="checkbox"/> (Please check)	Monthly payment or rent:	How long?	

CO-APPLICANT EMPLOYMENT INFORMATION

Current employer:	Position:	How long?	
Employer address:		Phone:	
City:		State:	ZIP Code:
Annual Income:	Other Annual Income:	Source:	

I certify that the above information is complete and accurate. I authorize an investigation on my credit and employment history. And the release of any related information. I authorize the exchange of my credit application with others in connection with this application. I have no obligations except as shown in the application, and no undisclosed lawsuits or judgments are entered against me.

Signed By:	Title & Position:	Date:
Personal Guarantor/Co-Applicant Signature:		Date: