



FINANCE APPLICATION

Fax completed application to: 866-800-3709

Date: _____

Sales Manager: Javier Gadala

Phone number: 713-354-4656

Vendor Services Rep: Anne Ferreira

Phone number: 800-745-9292 Ext 3289

BUSINESS INFORMATION

Legal Business Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____

Business Type: Corporation Sole Proprietor LLC Partnership Non Profit Business Description: _____

Federal Tax ID: _____ Business Start Date: _____

Primary Contact: _____ Email Address: _____

PRINCIPAL INFORMATION

Principal Name: _____ Title: _____

SSN: _____ % Ownership: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Principal Name: _____ Title: _____

SSN: _____ % Ownership: _____

Home Address: _____

City: _____ State: _____ Zip: _____

EQUIPMENT INFORMATION

Vendor: _____ Vendor Address: _____

Vendor Contact: _____ Vendor Phone: _____

Equipment to be financed with cost (attach additional sheet if necessary): _____

Financing Option: \$1.00

Financing Term: 24 36 48 60 months

Each of the undersigned certifies that the information requested above is accurate. The Lessee named above, its owners and/or principals, and all individuals whose names appear on the application expressly authorize consumer reporting agencies and other persons to furnish credit information to Key Equipment Finance, Inc., separately or jointly with other creditors or lessors, for use in connection with the lease. Key Equipment Finance and joint users of such information are authorized to receive and exchange credit information and to update such information as appropriate during the term of the lease. Information about you may be used for marketing and administrative purposes and shared with our affiliates. However, you may direct us not to share with our affiliates certain information (other than transaction or experience information) about you by writing to us at: Key Equipment Finance, ATTN: Vice President - Operations, 600 Travis Street, Suite 1300 Houston, TX 77002 (Please include your social security number).

NOTICE: 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 Key Equipment Finance (Customer Service) 600 Travis Street, Suite 1300 Houston, TX 77002 or call 800-745-9292 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. The federal Equal Credit Opportunity Act prohibits creditors from discriminating 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 Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

The applicant has read and agrees to the above ECOA consent and notice. The applicant also agrees to pay a documentation fee should he/she decide to engage the lease. Please note, if this is a non-governmental lease application under \$250,000, it is being submitted to Key Equipment Finance, and may also be submitted to other funding sources.

Authorized Signature

Authorized Signature

Print Name

Print Name