



<b>CREDIT APPLICATION</b>			
COMPLETE LEGAL NAME		DATE	
MAILING ADDRESS / BUSINESS ADDRESS		PHONE NUMBER	FAX NUMBER
EQUIPMENT LOCATION		PHONE NUMBER	CONTACT
TYPE OF BUSINESS		FEDERAL ID NUMBER	YEARS IN BUSINESS
ORGANIZATION STRUCTURE <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC <input type="checkbox"/> NON-PROFIT CORPORATION			
EQUIPMENT DESCRIPTION		NEW / USED	ESTIMATED COST
INSURANCE AGENT		AGENT'S PHONE NUMBER	
PRINCIPAL / OFFICER / PARTNER	SOCIAL SECURITY	TITLE / % OWNED	HOME ADDRESS & TELEPHONE
BANK / MONEY MARKET ACCOUNTS	ACCOUNT #	TELEPHONE	OFFICER TO CONTACT
TRADE REFERENCES	ACCOUNT #	TELEPHONE	CONTACT
COMPARITIVE CREDIT	ACCOUNT #	TELEPHONE	CONTACT
<p>Applicant warrants that all credit and financial information submitted to Lessor herewith or at any other time is true and correct. I/We authorize any financial institution or other credit references to verify information or provide additional information, which Delta Financial Services Group, Inc. and its assigns may request. I/We further specially consent to and authorize the obtaining and use of consumer credit reports now and from time to time, as may be needed in the credit evaluation and review process. The undersigned authorizes release all necessary information via mail or facsimile as requested.</p>			
_____	_____	_____	_____
Printed Name	Signature	Title	Date
_____	_____	_____	_____
Printed Name	Signature	Title	Date