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LESSEE

LEGAL BUSINESS/ENTITY NAME: _____

DBA _____

BUSINESS ADDRESS: _____

CITY: _____ STATE: _____ Zip: _____

BUSINESS PHONE: _____ CONTACT: _____

TYPE OF BUSINESS/INDUSTRY: _____ YEARS IN BUSINESS: _____

PROP. [] PTSHP [] CORP. [] LLC/LLP [] FEDERAL TAX ID # _____

OWNER INFORMATION

OFFICER NAME: _____ TITLE: _____

HOME ADDRESS: _____ SS#: _____

CITY: _____ STATE: _____ Zip: _____ % of ownership: _____

CELL PHONE: _____ EMAIL: _____

OFFICER NAME: _____ TITLE: _____

HOME ADDRESS: _____ SS#: _____

CITY: _____ STATE: _____ Zip: _____ % of ownership: _____

CELL PHONE: _____ EMAIL: _____

VENDOR INFORMATION

VENDOR: _____ CONTACT: _____ PHONE: _____

EQUIPMENT: _____

COST \$ _____ TERM: 36 MONTHS [] 48 MONTHS [] 60 MONTHS []

The undersigned individual recognizing that his/her individual credit history may be a factor in the evaluation of the credit of the applicant, hereby consents to and authorizes the above named business credit provider and any assignee, lender or funding service that may be utilized to obtain and us a consumer credit report and financial institution references on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim they would other wise have under the Fair Credit Reporting Act in the absence on this continuing consent.

Authorized Signature: _____ Printed Name: _____