EQUIPMENT FINANCE	BACE Equipment Finance 200 Ratchford Rd. York, SC 29745 770-552-4004 • Fax: 404-857-1411			DATE  REP: J Prothero  770-552-4004 x8001  Jprothero@bacecorp.com				
FULL LEGAL COMPANY NAME					MO. YR.			
STREET, CITY	STATE ZIP				PHONE			
TYPE of BUSINESS (select one) Proprietorship Partnership	LC			FAX				
LESSEE CONTACT NAME EMAIL					FEDERAL TAX I D			
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PERSONAL INFORMATION  NAME  % of OWNERSHIP NAME  % of OWNERSHIP						% of OWNERSHIP		
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HOME PHONE			HOME PHONE					
SOCI AL SECURI TY NO.			SOCI AL SECURI TY NO.					

VENDOR INFORMATION									
CONTACT		PHONE	EMAI L						
EQUIPMENT DESCRIPTIO		CHECK ONE:							
	NEW USED								
EQUIPMENT LOCATION (if different from COMPANY address above)									
TERM	COMMENTS			INVOICE AMOUNT					
(MONTHS)				\$					
	COMMENTS								

## **CREDIT RELEASE**

Everything that I/we have stated in this application is correct and to the best of my/our knowledge. I agree to notify you of any material change(s) in my financial condition. By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to BACE Equipment Finance or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. 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 facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual/s identified in the above application. I/We hereby authorize our banks, trade references, and financial institutions the right to release credit information to Lessor.

individual/s identified in the above application. I/We hereby authorize our banks, trade refere information to Lessor.	
XX	