



FINCORP, L.L.C.

2670 106TH ST., SUITE 200 • URBANDALE, IA 50322
800-666-6811 • 515-278-5917 • 515-698-9699 (fax) • www.unitedfincorp.com

DEALER INFORMATION

Dealer		Address	
Phone Number	Fax Number	E-mail	Date

EQUIPMENT DESCRIPTION

Itemize Maintenance, Services, Training, Installation, if applicable					
Quantity	Manufacturer	Model Number	Description	<input type="checkbox"/> New <input type="checkbox"/> Used	Equipment Cost
				<input type="checkbox"/> New <input type="checkbox"/> Used	\$
				<input type="checkbox"/> New <input type="checkbox"/> Used	\$
				<input type="checkbox"/> New <input type="checkbox"/> Used	\$
					Total Equipment Cost
					\$

TERM/LEASE PAYMENT SCHEDULE

Term (Months)	Security Deposit/Advance Payment (Check One Only)	Lease End Purchase Option
<input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60	Security Deposit(s) \$ Advance Payment \$	<input type="checkbox"/> FMV <input type="checkbox"/> 10% <input type="checkbox"/> \$1.00 <input type="checkbox"/> Loan

CUSTOMER INFORMATION

Lessee Name		Lessee Phone Number		E-mail	
Address			City	County	State Zip
Signer Name & Title			TAX ID Number	Nature of Business	
Year Started	Type of Business			Phone #	Fax #
	<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> P.C. <input type="checkbox"/> L.L.C.				

REFERENCES

Bank Reference	Account #
Bank Phone #	Bank Contact
Trade Reference	Phone #
Account #	Contact

PERSONAL INFORMATION ON PARTNERS, PROPRIETORS, OR GUARANTORS

Name		Name	
Title	Social Security #	Title	Social Security #
Address	City	State	Zip
Address	City	State	Zip
Phone #	Phone #		

AUTHORIZATION

The undersigned individual(s) who is either a Principal, Sole Proprietor, or Personal Guarantor of the Credit Applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the Applicant or in the evaluation of his or her personally guaranty, if applicable, hereby consents to and authorized the use of a consumer credit report on the undersigned individual(s) by the above names business credit grantor and/or its assigns, from time to time as may be needed, in the initial credit evaluation and subsequent review processes. I/we stand advised that the Advance Payment or Security Deposit is not refundable unless this application is rejected by Lessor.

Partner, Proprietor or Guarantor <input checked="" type="checkbox"/>	Partner, Proprietor or Guarantor <input checked="" type="checkbox"/>
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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 call 800-666-6811 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 for the statement. NOTICE: 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 the law concerning the creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20590.