## **Commercial Lease Application**

Return completed application to: Grant Gardner

Phone: (949) 200-7326 Fax: (949) 335-5537

Email: grant@highlandfinancialgroup.net



Company Information									
Legal Business Name Address						/Zip		Lease Own	
Email Address		Phone Number			Fax Number				
Business Type					Fed Tax ID #	1	Time in Business		
Corporation ( C Corp S Co	rp LLC)	Sole Pro	prietorship	Partnership	Non-Pr	ofit			
Principles Information									
Name		Title	Title			Social Security Number		% Ownership	
Home Address		City/State/Zip	City/State/Zip				r		
						Own			
Name		Title	Title			Social Security Number		% Ownership	
Home Address		City/State/Zip	City/State/Zip				Phone Numbe	r	
						Own			
Company Bank References (Personal	account okay if Sole P	rop)							
Bank/Institution Name Phone Number		Account Type			Account I	Account Number Average M		nly Balance	
		Checking		Savings Other					
Bank/Institution Name Phone Number		Account Type	Account Type			Account Number Ave		verage Monthly Balance	
		Checking	Checking Savings Other						
Lease/Loan Reference	1.				IA AN I				
Institution Name		Phone Number	Phone Number		Amount Financed		Account Number		
Equipment Details									
Equipment Description			Estimated Cost	Ver	ndor Name	Contact Person		Phone Number	
Applicant Consent									
The above information, along with any financia	al statements, schedules, or	other materials is subm	nitted for the purpose	e of obtaining credit a	and is warranted to be	rue, correct, and co	mplete. The unde	ersigned hereby	
warrants that any indvidual identified above when	no is either a principle, perso	onal guarantor, or a sol	e proprietor of the c	redit applicant, recog	nizing that his or her ir	dividual credit may	be a factor in the e	evaluation of the credit	
history of the applicant, has provided his/her w	ritten authorization for inqui-	ry into their credit worth	iness, included but l	limited to a consume	r credit report and shal	hold Highland Fina	ncial Group and its	s assignees harmless	
from the same. Highland Financial Group is h	ereby authorized to investiga	ate (directly or through	an agent or nomine	e) you/their credit and	d financial responsibilit	/. You understand t	hat such investiga	tion may include	
seeking information as to the backgroun, cred	t, and financial responsibility	of your officers or prin	ciples (or any of the	m).					
Signature		Print Name	Print Name				Date		
		I							