



314 W. Genesee Ave. • Saginaw, MI 48602 • (989) 755-4411 • (800) 292-0235 • Fax: (989) 755-4469

LEASE APPLICATION

Individual or
Company Name _____ P.O. Box _____

Street _____ City/State/Zip _____

Phone _____ Fax _____ Cell _____

E-mail _____ Owner/President _____

Soc. Security no. ____/____/____ Date of Birth ____/____/____ Yrs. in business _____

Others authorized to sign _____

Circle one: Sole Proprietor Partnership Corporation Other (Describe) _____

Insurance Agency _____ City _____ Phone _____ Fax _____

Insurance Liability Limit _____ Physical Damage Deductible _____

Bank _____ Contact _____ City/State _____

Bank account no. _____ Phone _____ Fax _____

Trade References (To whom you owe money, other than a finance company)

Name _____ City/State _____ Phone _____

Name _____ City/State _____ Phone _____

Name _____ City/State _____ Phone _____

Terms: Net due on date out. Subsequent invoices due at beginning of each rental period. A service charge of up to 5% per month may be added to unpaid balances.

Permission is hereby granted to the references listed above and on side two of this application and Scientific Leasing to release credit information pertaining to the applicant. Applicant also gives Scientific Leasing permission to obtain credit information from a credit reporting agency or service.

Signature _____ Title _____ Date _____

(Complete side two if applying for Lease/Purchase)

Scientific Leasing Account Application – Side Two

Individuals or sole proprietors applying for lease/purchase should complete this side. Corporations and LLCs should furnish the last two most recent year-end financial statements.

Years at current address _____ Own _____ Rent _____
 (If less than 2 yrs. provide previous address) _____

Mortgage holder or Landlord _____ Phone _____
 Address _____ City/State/Zip _____ Acct. # _____

Previous Mortgage or Landlord _____ Phone _____
 Address _____ City/State/Zip _____ Acct. # _____

Finance Company (s) used for auto, truck and trailer purchases:

Name _____ Acct. # _____ Phone _____

Name _____ Acct. # _____ Phone _____

Name _____ Acct. # _____ Phone _____

ASSETS – (The value of what you own)

Home \$ _____
 Other Real Estate \$ _____
 Auto (s) \$ _____
 Trucks/Trailers (describe) _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 Cash in Bank \$ _____
 Stocks, Bonds, CD's \$ _____
 Other Assets \$ _____
 Total Assets \$ _____

LIABILITIES - (What is owed on your assets)

Home Mortgage Balance \$ _____
 Other Mortgage Balance \$ _____
 Auto Loan Balance (s) \$ _____
 Truck/Trailer Loan Balances _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 Total credit card debt \$ _____
 Other debt \$ _____
 _____ \$ _____
 Total Liabilities \$ _____

Currently Hauling For/ Leased To:

Company	Phone	Contact
1. _____	_____	_____
2. _____	_____	_____

Major Maintenance/Repairs Done By: _____ Phone _____

Address where vehicles are parked when not in use: _____

Permission is given to the above references to release credit information pertaining to the applicant.

Signature _____ Date _____