|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Lessee Company Information | | | | | | | | | |
| Business Name: | | | | | | | | | |
| Business Address: | | | | | | | | | |
| City: | | State: | | | | | Zip Code: | | |
| Email: | | | | Monthly payment or rent: | | | | | Phone Number: |
| EIN: | Type of Business: □ Corporation □ Partnership □ Proprietorship □ Non-Profit | | | | | | | | |
| Years in Business: | Annual Sales: $ | | | | | | | | |
| **Officers, Partners, or Guarantors Information** | | | | | | | | | |
| Name: | | | | | | Title: | | | |
| SSN: | | | % Ownership | | | | | Phone Number: | |
| Address: | | | City, State: | | | | | Zip Code: | |
| **Officers, Partners, or Guarantors Information** | | | | | | | | | |
| Name: | | | | | | Title: | | | |
| SSN: | | | % Ownership | | | | | Phone Number: | |
| Address: | | | City, State: | | | | | Zip Code: | |
| Vendor Information | | | | | | | | | |
| Vendor Name: | | | | | Contact | | | | |
| Phone Number: | | | | | Email: | | | | |
| **Equipment Information** | | | | | | | | | |
| Vendor: | | | | | Equipment Cost: $ | | | | |
| Equipment Description: | | | | | | | | | |
| **Declaration** | | | | | | | | | |
| This application may be executed by facsimile/ email signature(s). Delivery of this application bearing a facsimile/ email signatures(s) shall have the same force and effect as if the application bore an inked original signature(s). The above information together with any accompanying financial statements, schedules, or other materials, is submitted for the purpose of obtaining credit and is warranted to be true, correct and complete. The undersigned hereby warrants that any individual identified above who is either a principal, a person guarantor or a sole proprietor of the credit application, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, has provided his/her written authorization for inquiry into their credit worthiness, including but not limited to obtaining a consumer credit report, and shall hold The Global Group and its assignees, agents or nominees harmless from same. You understand that such investigation may include seeking information as to the background, credit and financial responsibility of your officers and principals (any of them). The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into the 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. If for any reason your application for business credit is denied, you have the right to a written statement of specific reason for the denial. To obtain the statement, please write to The Global Group. 10250 SW 56 St. Suite A-202 Miami, FL 33165 | | | | | | | | | |
| Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |