

Classic Financial Services & Equipment Leasing, Inc.

346 Debbie Lane Schaumburg, IL 60194
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Business Information

Lease Application

Legal Name of Business Entity				Contact Person	
Street Address		City	State	Zip	Phone Number
• Federal Tax ID#		Email Address::			MC #
_____ # of Trucks		_____ # of Trailers		_____ Years Time in Business	
First Time Buyer? Y N					

Ownership / Guarantor Information

Principal's Name		Title	% Ownership	Date of Birth	Social Security Number
Home Address		City	State	Zip	Rent <input type="checkbox"/> Own <input type="checkbox"/>
				Home Phone	Drivers License #
Principal's Name		Title	% Ownership	Date of Birth	Social Security Number
Home Address		City	State	Zip	Rent <input type="checkbox"/> Own <input type="checkbox"/>
				Home Phone	Drivers License #

Haul Information

Current Company Name		Contact Person	Ph #	How Long?
Previous Company Name		Contact Person	Ph #	How Long?

Comparable Credit References (Equipment Financing)

Company Name		Account #	Ph #	Contact
Company Name		Account #	Ph #	Contact
Company Name		Account #	Ph #	Contact

Bank Information

Bank Name & Branch		City/State	Phone #	Account Type	Account Number
Bank Name & Branch		City/State	Phone #	Account Type	Account Number

Personal References

Name				Phone #	2 nd Phone #
Street Address		City	St	Zip	Relationship
					2 nd Phone #
Name				Phone #	2 nd Phone #
Street Address		City	St	Zip	Relationship
					2 nd Phone #

Have you filed for Bankruptcy protection in the past ten years? _____ Do you have any outstanding liens or judgments? _____

THE UNDERSIGNED HEREBY AUTHORIZES OUR BANKS, TRADES, AND REFERENCES TO RELEASE CREDIT INFORMATION TO CLASSIC FINANCIAL SERVICES & EQUIPMENT LEASING, INC. OR ITS ASSIGNS. I/WE WARRANT THE ACCURACY OF THE INFORMATION IN THIS APPLICATION AND ANY OTHER FINANCIAL INFORMATION SUBMITTED BY THE UNDERSIGNED. ALL INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE.

Signed Signed Date