

STUDEBAKER-WORTHINGTON LEASING CORP.  
100 Jericho Quadrangle, Jericho, N.Y. 11753  
**800-645-7242 - FAX # 516-938-5604**

Complete and  
FAX TO:

**CREDIT APPLICATION**

Date: \_\_\_\_\_

SWLC Account Executive: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_ Lease Term Requested: \_\_\_\_\_ months

**EQUIPMENT VENDOR INFORMATION:**

Contact Person: **MicroGraphic Solutions** \_\_\_\_\_

Company Name: 1799 W. 5th Avenue - Suite 124 \_\_\_\_\_

Address: Columbus, Ohio 43212 \_\_\_\_\_

Phone: (614)-209-7485 Ext.: \_\_\_\_\_ FAX: (937)-644-8897

**CUSTOMER INFORMATION:**

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ Ext.: \_\_\_\_\_ FAX: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Contact Person: \_\_\_\_\_

No. of Years in Business: \_\_\_\_\_ Type of Business:  Corporation  Partnership  Proprietorship

Nature of Business: \_\_\_\_\_

**CREDIT INFORMATION**

Bank Reference (If less than 2 years, also provide prior bank)

Bank Name: \_\_\_\_\_ Bank Name: \_\_\_\_\_

Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ Ext.: \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ Ext.: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Checking A/C Number: \_\_\_\_\_ Checking A/C Number: \_\_\_\_\_

Loan A/C Number: \_\_\_\_\_ Loan A/C Number: \_\_\_\_\_

Accountant:

Accounting Firm: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Trade References:

1. \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

2. \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

3. \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Principal Owners:

1. Name: \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Soc. Sec. #: \_\_\_\_\_

Home Address: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Soc. Sec. #: \_\_\_\_\_

Home Address: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Soc. Sec. #: \_\_\_\_\_

Home Address: \_\_\_\_\_

**AUTHORIZATION TO RELEASE CREDIT INFORMATION**

To: \_\_\_\_\_ (Name of Bank)  
\_\_\_\_\_  
(Street Address)  
\_\_\_\_\_  
(City, State, Zip)

From: \_\_\_\_\_ (Name of Customer)  
\_\_\_\_\_  
(Street Address)  
\_\_\_\_\_  
(City, State, Zip)

Attention: \_\_\_\_\_ Phone: \_\_\_\_\_

Bank Phone No.: \_\_\_\_\_ Checking Acct. No.: \_\_\_\_\_

Bank Fax No.: \_\_\_\_\_ Loan Acct. No.: \_\_\_\_\_

By: \_\_\_\_\_ (Signature of Customer)  
Title: \_\_\_\_\_ (Title of Person Signing)

**As a customer of the bank, I request that you release to Studebaker-Worthington Leasing Corp. the information requested below.**

**We are proposing to enter into a commercial equipment lease with Studebaker-Worthington for business purposes only.**

**Thank you for your assistance.**

Please phone or fax the following information to Studebaker-Worthington Leasing Corp., 100 Jericho Quadrangle, Jericho, N.Y. 11753

Studebaker Phone No.: 800-645-7242

Studebaker Fax No.: 516-938-5604

**Checking Acct.**

Account Opened: \_\_\_\_\_ Average Bal.: \_\_\_\_\_ Sat./Unsat.: \_\_\_\_\_

Overdrafts: \_\_\_\_\_

Returns: \_\_\_\_\_

**Loan Acct.:**

Unsecured.

Secured by:  Building/Realty  Vehicle  Equipment  AR/INV  
 All Assets  Other \_\_\_\_\_

Date Opened: \_\_\_\_\_ Highest Loan Amount: \_\_\_\_\_ Pres. Bal.: \_\_\_\_\_

Terms: \_\_\_\_\_

Payment Experience: \_\_\_\_\_

Comments: \_\_\_\_\_

Bank Representative: \_\_\_\_\_ (Signature)