



LEASE APPLICATION

PLEASE FAX / EMAIL LEASE APPLICATION TO: FREEDOM LED SIGNS
FAX - (866) 430-5250 EMAIL - sales@freedomLED.com
Questions call 1-800-266-0247

LEGAL NAME OF LESSEE		DBA (IF ANY)		PHONE	
ADDRESS (STREET)		(CITY)	(COUNTY)	(STATE)	(ZIP)
LOCATION OF EQUIPMENT (STREET)		(CITY)	(COUNTY)	(STATE)	(ZIP)
TYPE OF BUSINESS	AGE OF BUSINESS	PRESENT OWNERSHIP	# OF EMPLOYEES	FED'L TAX I.D. #	
(CIRCLE) LANDLORD MORTGAGEE		(CIRCLE) PROPRIETORSHIP PARTNERSHIP CORPORATION			
LANDLORD / MORTGAGEE	ADDRESS		CONTACT		PHONE

OWNERSHIP Information:

PRINCIPAL'S NAME	TITLE	% OWNERSHIP	HOME PHONE	SOC. SEC. #
HOME ADDRESS	(CITY)	(STATE)	(ZIP)	HOW LONG AT ADDRESS? DATE OF BIRTH
PRINCIPAL'S NAME	TITLE	% OWNERSHIP	HOME PHONE	SOC. SEC. #
HOME ADDRESS	(CITY)	(STATE)	(ZIP)	HOW LONG AT ADDRESS? DATE OF BIRTH

BANK Information:

BANK NAME	ADDRESS	(CITY)	(STATE)	(ZIP)	CONTACT
ACCOUNT NAME	ACCOUNT #			PHONE	

TRADE Information :

COMPANY NAME	ADDRESS	(CITY)	(STATE)	(ZIP)	CONTACT	PHONE
COMPANY NAME	ADDRESS	(CITY)	(STATE)	(ZIP)	CONTACT	PHONE

VENDOR / DISTRIBUTOR Information:

VENDOR / DISTRIBUTOR	CONTACT	FAX	PHONE
ADDRESS	(CITY)	(STATE)	(ZIP) FED'L I.D. #

EQUIPMENT Information:

QUANTITY	EQUIPMENT DESCRIPTION	COST OF EQUIPMENT	# OF MONTHS
		(CIRCLE) AUTOMATIC PAYMENT WITHDRAWAL	FACTOR
		YES NO	PAYMENT \$

The undersigned (1) authorizes, Freedom LED Signs and affiliates, its heirs & assigns to obtain a personal credit report on all principals & guarantors for credit purposes, and (2) authorizes the release to Freedom LED Signs and affiliates of all credit information it may request, including business & personal banking, mortgage, landlord, trade & lease information.

X _____ X _____ DATE: _____