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## Access Capital Lease Application:

**Legal Company Name:** \_\_\_\_\_  
**DBA:** \_\_\_\_\_ **Fed Tax ID#:** \_\_\_\_\_  
**Physical Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

### Business Checking

**Bank Name:** \_\_\_\_\_ **Account #:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

### Trade References

**Trade:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Trade:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

### Lease or Loan Reference

**Lender:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Account#** \_\_\_\_\_

**Equipment:** \_\_\_\_\_ **Amount:** \_\_\_\_\_ **Term:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Equipment Description

**Type:** \_\_\_\_\_ **Cost:** \_\_\_\_\_ **New or Used (year if used):** \_\_\_\_\_

**Vendor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Est. Delivery Date:** \_\_\_\_\_

### Ownership

**Time in Business:** \_\_\_\_\_ **Company Structure:** Proprietorship    Corporation    LLC    Partnership

**Owner 1:** \_\_\_\_\_ **SS#** \_\_\_\_\_ **% Ownership** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Owner 2:** \_\_\_\_\_ **SS#** \_\_\_\_\_ **% Ownership** \_\_\_\_\_ **Title:** \_\_\_\_\_

By signing below, each undersigned individual(s), who is either a principle of the credit applicant listed below or a personal guarantor of its obligations, provides written instruction to Lessor or its designee (and any assignee or potential assignee thereof) authorizing review of his or her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the application of the credit applicant and subsequently for the purposes of update renewal or extension of such credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be as valid as the original. In addition to authorizing review of My/Our credit profile from any national credit bureau the undersigned also authorizes My/Our financial institutions and creditors to release credit information required by Lessor or its designee (and any assignee or potential assignee thereof).

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Fax to Mark Strickland @ 714-415-7821 / Tel 714-415-7823**