

CREDIT APPLICATION



LESSEE INFORMATION

Full Business Name: _____ D/B/A Name _____
Address: _____
Street City State Zip
Phone: _____ Federal Tax ID#: _____ Yrs. in Business: _____
Contact Name: _____ Email: _____
Nature of Business: _____
Proprietorship Corporation Partnership Limited Liability Corporation

BUSINESS OWNERS

Owner Name: _____ Title: _____ %Ownership: _____
Home Address: _____
Street City State Zip SSN: _____

EQUIPMENT INFORMATION

Equipment Description: _____
Equipment Cost: _____ Term: _____ End of Lease Option (FMV, \$1 Out): _____

VENDOR INFORMATION

Vendor Name: _____ Vendor Email: _____
Vendor Phone: _____

CREDIT RELEASE AUTHORIZATION

By signing below, the undersigned, which is either a principal of the applicant or a personal guarantor of its obligations, provides written instruction to Navitas Credit Corp. or its assignee, authorizing review of his or her personal credit bureau and authorizing applicant's bank and credit references to release credit information on applicant.

Signature: _____ Title: _____
Name: _____ Date: _____



NAVITAS
CREDIT CORP.

To learn more about our financing programs contact your Financing Specialist, Stuart Jablonski at 877.628.4827, ext. 551, fax: 678.395.5390 or email sjablonski@navitascredit.com. We look forward to changing how you view the value of your financing partner one deal at a time.

Navitas Credit Corp. • 203 Fort Wade Road • Suite 300 • Ponte Vedra, FL • 32081
877.628.4827, Tel. • 678.395.5390, Fax • www.navitascredit.com