

BBS FINANCIAL CREDIT APPLICATION



Full Legal Business Name _____

DBA (if applicable) _____

Address _____

City _____ State _____ County _____ Zip Code _____

Officer Name _____ Title _____

Phone _____ Email _____

Fed ID # _____ Sales Rep _____

Type Of Business: Corporation Partnership Sole Proprietor
(choose one) Church Government Entity Other Non-Profit

Years In Business _____

Tax Exempt? Yes No If Yes, Please Include the Tax Exempt Certificate.

Buyout Included? Yes No If Yes, Please Include Buyout Amount _____

Additional Comments

BILLING INFORMATION

Same as address above

Address _____

City _____ State _____ Zip Code _____

Accounts Payable Contact _____ Phone _____ Email _____

EQUIPMENT LOCATION

Same as address above

Address _____

City _____ State _____ Zip Code _____

OWNERS/OFFICERS

Name _____ Title _____

SSN _____ Home Phone _____ Cell Phone _____

Home Address _____ Email _____

City _____ State _____ County _____ Zip Code _____

Have you ever filed bankruptcy? Yes No If yes, when? _____

Name _____ Title _____

SSN _____ Home Phone _____ Cell Phone _____

Home Address _____ Email _____

City _____ State _____ County _____ Zip Code _____

Have you ever filed bankruptcy? Yes No If yes, when? _____

BANK INFORMATION**

Bank Name _____ Bank Officer _____

Phone _____ Deposit/Check Acct. # _____ Loan Acct. # _____

Address _____

City _____ State _____ Zip Code _____

**Three (3) months of bank statements are required.

ACCOUNT INFORMATION TO BE COMPLETED BY BANK PERSONNEL ONLY

Date Opened _____ Overdrafts Yes No If yes, how many in the last 12 months? _____

Average Daily Balance _____ Returns Yes No If yes, how many in the last 12 months? _____

Is this account linked to a revolving line of credit? Yes No

TRADE REFERENCE

Name of Company _____ Contact Person _____

Address _____ Email _____

City _____ State _____ Zip Code _____ Phone _____

Credit Line Amount \$ _____ Length of Relationship _____

The person(s) supplying the above information certifies to both potential lessors identified above that it is true and correct. The owners/officers recognize that their individual credit histories may be a factor in the evaluation of the lease applicant and, thus, authorize the lessor(s) or its assignee or its designee to investigate their personal credit status. This includes obtaining and using their consumer credit reports from time to time in the credit evaluation and collection processes, as well as to offer future credit products or services.

AUTHORIZED BY

Signature _____ Title _____

Printed Name _____ Date _____

*To ensure your request is completed in a timely manner, please make sure to complete this form in its entirety.
Upon completion of this form, please submit via the "Submit Form" button or manually email to BBSFinancial@benchmarkyouroffice.com*