



CREDIT APPLICATION

CORPORAM
230 N. DIXIE HWY, BAY 32-33
HOLLYWOOD, FL 33020 USA
TEL : (954) 505-4995
FAX: (954) 505-4998
ACCOUNTING@CORPORAM.COM

LESSEE INFORMATION

Legal Name :

Address :

Telephone :

City / State :

Cellular :

Zip Code:

Fax:

Contact :

Email :

Type of Business :

Since :

BANK INFORMATION (INCLUDE A SAMPLE CHEQUE)

Name :

Name :

Address :

Address :

City / State / Zip :

City / State / Zip :

Telephone :

Telephone :

Fax:

Fax:

Account No :

Account No :

Line of credit (\$) :

Line of credit (\$) :

Utilized (\$) :

Utilized (\$) :

EQUIPMENT DESCRIPTION (ATTACH QUOTE TO THE CREDIT APPLICATION)

Quantity	Description	Price

PAYMENT

Equipment Cost (\$) :

Term (months) :

Deposit (\$) :

Contract Fees (\$) :

Monthly Payments :

PERSONAL INFORMATION

Name :

Name :

Address :

Address :

City / State :

City / State :

Zipcode :

Zipcode :

Telephone (Home) :

Telephone (Home) :

Social Sec. Number :

Social Sec. Number :

Date of Birth :

Date of Birth :

Owner Y/N ?

Since :

Owner Y/N ?

Since :

Value of Real Estate :

Value of Real Estate :

Mortgage Balance (\$) :

Mortgage Balance (\$) :

CONSENTMENT AND SIGNATURE: the undersigned certifies that the above information is true and correct. By signing below, I/we consent to CORPORAM and/or its warrantors to obtain from any Credit Reporting Agency or Credit Guarantor with whom the undersigned has financial relations, any information it may require at any time in connection with the credit application hereby, and consent to its full disclosure at any time.

Signature (A)

Signature (B)

Date