



COMMERCIAL CREDIT APPLICATION

11311 Little Road
New Port Richey, FL 34654
Toll Free (800) 255-5341
Facsimile (866) 296-0270

BUSINESS INFORMATION

Company Contact Name
DBA D-U-N-S Number
Street Address
City County State ZIP Code
Telephone Fax
e-mail Address Website
Business Type Date Established
[] Corp. [] Part. [] Prop. # Of Employees State Fed Tax ID

OWNER/ STOCKHOLDER INFORMATION (If more room is needed please attach separate sheet)

Name Name
Percent Ownership Percent Ownership
Street Street
City State ZIP City State ZIP
Title SSN Title SSN

BANK REFERENCE

Bank Account #
Branch Account Type
Officer Telephone

CREDIT REFERENCE (Lease or Loan)

Creditor Account #
Contact Telephone

TRADE REFERENCES

Trade Reference Telephone
Trade Reference Telephone
Trade Reference Telephone

EQUIPMENT INFORMATION (That you intend to lease)

Vendor Contact
Telephone Fax

Equipment Description
Equipment Cost (excluding sales tax) \$
Lease Term: [] 24 [] 36 [] 48 [] 60 [] Other EOL Purchase Option: [] \$1.00 [] 10% [] FMV

AUTHORIZATION TO RELEASE INFORMATION

By signing below, I/We as principal(s) of and/or guarantor(s) for the applicant(s), hereby consent to Caladesi Capital, Inc., its assigns or potential assigns, to obtain, use, review, and consider the personal credit profile provided by national credit bureaus in considering this Application for the purpose of extension of business credit to the applicant, or the renewal, or the collection, or updating of any resultant accounts. I/We authorize the banking and credit contacts listed above to release any and all credit and financial information requested. I/We consent to photocopying our driver's licenses for verification purposes in conjunction with a commercial lease transaction. I/We expressly waive the rights of any direct, indirect, incidental, consequential or punitive damages arising out of the submission or use of our lease application. By signing below the undersigned individual(s) hereby (1) affirm their respective identity as the individual(s) identified herein and (2) that their signatures below are their true and accurate signatures. I understand that by providing my/our fax number(s), and/or email addresses, I / we consent to receive all fax and/or email communications sent by on or behalf of Caladesi Capital, Inc. A fax or photocopy of this authorization shall be valid as the original. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that is responsible for and administers compliance with this law concerning this creditor is, Equal Credit Opportunity, Federal Trade Commission, Washington, DC 20580.

Applicant's Signature Date

Co-Applicant's Signature Date