

Dimension Funding, LLC

130 Mackinaw, 3rd Floor, Tahoe City, CA 96145
(888) 995-8886 x-228 Fax: (530) 584-5726

Commercial Lease Application

ACCOUNT EXECUTIVE Scott Stagnone x-228
DATE

LESSEE FULL COMPANY NAME				DATE ESTABLISHED (CURRENT OWNERSHIP)			
LESSEE FULL COMPANY ADDRESS		CITY	STATE	ZIP CODE	TELEPHONE	FAX	
TRADE STYLE OR NAME				FEDERAL TAX NO.			
TYPE OF BUSINESS				PROPRIETORSHIP	PARTNERSHIP	CORPORATION	STATE
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

GUARANTORS / OWNERS		(1)	(2)	(3)
NAME				
STREET				
CITY, STATE, ZIP				
HOME NUMBER				
SOCIAL SECURITY NUMBER				
TITLE				
% OF OWNERSHIP		%	%	%

CREDIT REFERENCES				
BANK	CITY/STATE	PHONE NUMBER	CONTACT	ACCOUNT NUMBER
LEASE OR FINANCE REFERENCES	CITY/STATE	PHONE NUMBER	CONTACT	ACCOUNT NUMBER
MAJOR TRADE ACCOUNTS	CITY/STATE	PHONE NUMBER	CONTACT	ACCOUNT NUMBER
BUSINESS LANDLORD				

VENDOR				
VENDOR NAME	ADDRESS	CITY	STATE	ZIP
CONTACT	CONTACT	RESALE #		
EQUIPMENT DESCRIPTION			NEW <input type="checkbox"/>	USED <input type="checkbox"/>
EQUIPMENT LOCATION (IF DIFFERENT FROM ADDRESS ABOVE)				
TERM	DATE	SECURITY DEPOSIT	TOTAL INVOICE WITHOUT TAX	

CREDIT RELEASE

I hereby authorize our banks, trade references, and financial institutions to release credit information to Lessor and further authorize to obtain other credit information including D&B Reports and Credit Bureau Reports.

X _____ DATE _____