



Fax Completed Application to 760-230-4166

Business Finance Contact: Jonathan Walmsley
Tel: 760-230-2307 Fax: 760-230-4166 E: JMW@WBCLeasing.com



Credit Authorization: I/We hereby authorize Wirth Business Credit, Inc., its assignee, assigns or potential assigns to review my personal credit and business profile provided by national credit bureaus in considering this application and for the purpose of updating, renewing, extending additional credit or the collection of any late account. I/We hereby authorize the parties listed to release all credit information and bank information and I/We represent and warrant that all the information submitted to Wirth Business Credit, Inc., including without limitation information on this application, any attachments, any supplemental, or other information herein is true, complete and accurate. I agree to immediately notify Wirth Business Credit, Inc. if any of such information changes materially in the 60 days after the date of the application. A facsimile, electronic or other copy of this authorization shall be valid as the original.

COMPANY INFORMATION

Full Legal Name:		State Incorporated:	Contact:
Address:		Business Type: (Corp/LLC/SP)	Email Address:
City/State/Zip:		Fed Tax ID:	Web Address:
Telephone:	Fax:	Years in Business:	Office Manager: (If applicable)

BANK INFORMATION

Name Of Bank:	Account Numbers:		
Bank Contact:	Telephone:	Fax:	
Name Of Bank:	Account Numbers:		
Bank Contact:	Telephone:	Fax:	

GUARANTORS

1. Name:	Title:	Percent Ownership:	Social Security #:	
Home Address:	City/State/Zip:		Home Tel:	Cell #:
2. Name:	Title:	Percent Ownership:	Social Security #:	
Home Address:	City/State/Zip:		Home Tel:	Cell #:
3. Name:	Title:	Percent Ownership:	Social Security #:	
Home Address:	City/State/Zip:		Home Tel:	Cell #:

REQUIRED SIGNATURES

Owners/Officers and/or Guarantors:	Date:
1.	Date:
2.	Date:
3.	Date:

VENDOR INFORMATION

Name: MALONE SPECIALTY INC. Transportation Products Division	Estimated Cost: \$
Branch Location: Mentor, OH.	Malone Specialty Contact Person:
Telephone: 800-874-3077	Estimated Delivery Date: _____ Equipment Description: _____

Desired Lease Term
36mths or 60mths

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