



Credit Application

CUSTOMER INFORMATION

LEGAL NAME	DBA	PHONE	FAX
ADDRESS	CITY	STATE	ZIP
EXECUTIVE OFFICE	CITY	STATE	ZIP
PARENT COMPANY	CITY	STATE	ZIP
CONTACT PERSON	TITLE	PHONE	EMAIL

TYPE OF BUSINESS			
CORPORATION (C or S), LLC, PROPRIETORSHIP, OR PARTNERSHIP		STATE OF INCORPORATION, ORGANIZATION OR REGISTRATION	
DUNS NUMBER	FEDERAL TAX ID#	YEARS IN BUSINESS	NATURE OF BUSINESS

PERSONAL INFORMATION				
PRINCIPAL'S NAME(S)	% OWNERSHIP	SOCIAL SECURITY #	HOME PHONE	DOB
HOME ADDRESS		CITY	STATE	ZIP

BANK/TRADE REFERENCES			
NAME OF PRIMARY BANK	# OF YEARS	CHECKING ACCT #	LOAN #'S
CONTACT PERSON	CONTACT PHONE	CONTACT FAX	CONTACT EMAIL
SECONDARY/PREV. BANK	# OF YEARS	CHECKING ACCT #	LOAN #'S
CONTACT PERSON	CONTACT PHONE	CONTACT FAX	CONTACT EMAIL
TRADE REFERENCE #1	CONTACT NAME	CONTACT PHONE	CONTACT EMAIL
TRADE REFERENCE #2	CONTACT NAME	CONTACT PHONE	CONTACT EMAIL

ACKNOWLEDGEMENT AND AUTHORIZATION

Customer warrants that all information in this application is accurate. Customer authorizes the above references, any credit reporting agency, or other third party (including Lakeland Financial Services, LLC or "LFS") to release and collect any credit information to LFS, its affiliates and their respective designees or assignees. Customer agrees that equipment leased from LFS will be used solely for business or commercial purposes. Customer agrees that a facsimile copy of this Agreement shall be deemed an original, and will be treated as an original for all purposes.

Signature X: _____ **Date:** _____

DEALER & TRANSACTION INFORMATION OUTLINED ON PAGE 2 OF CREDIT APPLICATION