



CREDIT APPLICATION FOR A BUSINESS ACCOUNT

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BUSINESS INFORMATION

Company Name:		Address:	
Phone:		City:	
Fax:		State, Zip:	
Date Established:		County:	
Co. Type:	<input type="checkbox"/> LLC <input type="checkbox"/> CORP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> SOLE PROP	Nature of Business:	
Tax ID:			

PRINCIPALS / GUARANTORS INFORMATION

Name:		Position:	
Home Address:		City, State ZIP Code	
Home Phone:		Mobile Phone:	
E-Mail		Soc. Sec. Number:	
% of Ownership		Date of Birth:	
Name:		Position:	
Home Address:		City, State ZIP Code	
Home Phone:		Mobile Phone:	
E-Mail		Soc. Sec. Number:	
% of Ownership		Date of Birth:	

COMPANY BANK REFERENCE

Bank Name:		Account #:	
Bank Contact Name:		Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other
Bank Contact Phone:		Bank Contact E-Mail:	

BUSINESS/TRADE REFERENCES

Company name:		Phone:	
Contact E-Mail:		Fax:	
Company name:		Phone:	
Contact E-Mail:		Fax:	
Company name:		Phone:	
Contact E-Mail:		Fax:	

THIS WILL BE YOUR AUTHORITY AND MY REQUEST FOR YOU TO RELEASE TO ADMIRAL LEASING AND/OR ITS ASSIGNEES, ANY INFORMATION THEY MAY REQUEST CONCERNING CREDIT STANDING WITH YOUR COMPANY AND/OR MONEY ON DEPOSIT. I HEREBY FURTHER AUTHORIZE ADMIRAL LEASING AND/OR ITS ASSIGNEES, TO OBTAIN ANY AVAILABLE PERSONAL CREDIT BUREAU REPORTS, AS WELL AS BANK AND TRADE REFERENCES, AND UTILIZE PHOTOCOPIES OF THIS RELEASE IN CONJUNCTION WITH THE CREDIT APPLICATION PROCESS

FOR (COMPANY NAME): _____

BY (NAME OF OFFICER): _____ TITLE: _____

SIGNATURE: _____ DATE: _____