



LESSEE APPLICATION

Company Name: _____ Tel _____ Fax _____
 Billing Address: _____ Corp. Secretary: _____
 City, State, Zip: _____ Federal Tax ID #: _____
 Type of Business: _____ Years in Business: _____
 Business Structure: Corp. Partnership Sole Prop. LLC E-Mail Address: _____
 Trade Name or DBA: _____ Web Address: _____

OWNERS / PRINCIPALS INFORMATION

(Any one person owning 20% or more)

Name: _____ Title: _____ % Owner: _____ Soc.Sec.No. _____
 Address: _____ City/State/Zip: _____ Tel. _____
 Name: _____ Title: _____ % Owner: _____ Soc.Sec.No. _____
 Address: _____ City/State/Zip: _____ Tel. _____

BUSINESS / BANKING INFORMATION

Bank: _____ Account#: _____ Contact: _____ Tel. _____
 Bank: _____ Account#: _____ Contact: _____ Tel. _____

CREDIT REFERENCES

(Include trades, suppliers, and other equipment leases)

1. _____ Account#: _____ Contact: _____ Tel. _____
 2. _____ Account#: _____ Contact: _____ Tel. _____
 3. _____ Account#: _____ Contact: _____ Tel. _____

VENDOR AND EQUIPMENT INFORMATION

Vendor: _____ Tel. _____ Fax _____
 Address: _____ City / State: _____ Zip: _____
 Equipment Description: _____
 Equipment Cost _____ Equipment location: _____

WESTOVER CAPITAL CONTACT

info@westovercapcorp.com

Phone 714-389-0500 / Fax 714-389-0501

By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Lessor or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in the above application.

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 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 has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law is the Federal Trade Commission Equal Credit Opportunity, Washington, D.C. 20580.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Lessor set forth above within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Name: _____ % of ownership: _____ Home address: _____ _____ SSN#: _____	Signature: _____ _____	Date: _____ _____
Name: _____ % of ownership: _____ Home address: _____ _____ SSN#: _____	Signature: _____ _____	Date: _____ _____
Name: _____ % of ownership: _____ Home address: _____ _____ SSN#: _____	Signature: _____ _____	Date: _____ _____
Name: _____ % of ownership: _____ Home address: _____ _____ SSN#: _____	Signature: _____ _____	Date: _____ _____

A FACSIMILE OF THIS DOCUMENT WILL BE CONSIDERED AN ORIGINAL