

# Application

**SCI Leasing Group**

**800-435-4700 Fax 317-758-3003**

GENERAL APPLICATION	Applicant's Name (Last, First, Middle Initial)		SS #	Date of Birth	Current SCI Customer? <input type="checkbox"/> No <input type="checkbox"/> Yes			
	Mailing Address		City	State	Zip			
	Physical Address (If different than mailing address)		County (Required)	E-Mail Address				
	Home Phone	Business Phone	Cell Phone	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated		Drivers License #		
	Description of Business							
	Legal Name of Business Under Which You Operate			Type of Business: <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Other (Please specify) _____				
	Federal Tax ID #							
	If Business Type is Partnership, LLC or Corporation, Please Provide Information for all Partners, Owners, or Officers Below							
	Owner/Partner/Officer		SS#	Residence (City, State)	Date of Birth	Telephone	% Owned	Title
Equipment Use: Farm ___% Custom Work ___% Construction ___% Commercial ___% Industrial ___% Rental Yard ___% Personal ___% Other ___% (Please Describe) _____								
Years In Business			County, State, Township In Which Equipment Will Be Kept					
	Primary Lender Name		City, State	Telephone	Contact Name			
Operating								
Machinery								
Bank								
Have you ever filed bankruptcy? _____			Are you a party to a lawsuit? _____					
Do you have any unsatisfied judgments? _____			Do you have any loans with FSA? _____					
Do you have any accounts past due? _____								
Financial Information	Total Assets \$		Total Liabilities \$		Total Sales Last Year \$ _____ Profit/Loss Last Year \$ _____			

**Complete This Section If You Have Income From Agriculture**

AG	Do You Farm? Full Time _____ Part Time _____ # of Acres Owned _____ # of Acres Rented _____ # of Acres Custom _____					
	Major Crops or Livestock					
	Description of Operation					
EQUIPMENT	Dealer		Contact		Phone	
	Equipment Description					
	Equipment Cost		Lease Term		Payment Frequency	
	Residual %		Advance Payment		Next Payment Due	
	Is Equipment Subject to Sales Tax?		Other Details			

For the purposes of obtaining credit, I (we) certify that all information on this application is true and correct. I grant SCI Leasing Group permission to obtain a credit report on me in connection with this transaction for all legitimate purposes. I (we) grant permission for the creditors listed above to provide all information requested by SCI Leasing Group. I (we) certify that this equipment is to be used for commercial, agricultural or business purposes and not for personal, family or household purposes.

Signed \_\_\_\_\_ Date \_\_\_\_\_