



Equipment Lease
Financing Specialists

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CREDIT APPLICATION

APPLICANT:

Company Legal Name:
Proprietorship,Partnership,Corporation,Other:
Address: Tax ID#:
City: State: Zip:
County: Phone: Fax#:
Equipment will be installed at, Same as Above: Other:
Type of Business: Time in Business:
Are you tax exempt?(circle) YES or NO Cell Phone:

PRINCIPALS:

Name & Title: SS #:
HomeAddress:
Name & Title: SS #:
HomeAddress:

EQUIPMENT DESCRIPTION:

New/Used: Equipment Cost:\$ Quantity
Vendor: Contact
Address: Phone #

BANKREFERENCE

Contact
City&State Phone
Type of Account: Acct#

TRUCK FINANCED:

Contact
City & State: Phone:

HAULINGREFERENCE:

Contact
City & State: Phone:

TRADE REFERENCE:

Contact
City & State: Phone:

The undersigned authorizes the release of any credit information to Teck Financing LLC or the assigned on loans, leases, checking, savings, trades, and personal credit bureau, now and in the future.

X Date