



Application for leasing
Hydroswing® NORTH AMERICA INC.

Lease Agreement #

Date

The original and still the Worlds No1 and best selling hydraulic doors, over 7000 units sold in the USA

Date:
Legal Business Name: Fed. ID#:
Address: City: State: Zip:
County Phone Fax:
Email Address:

PLEASE CHECK ONE:

Corporation L.L.C. Partnership Proprietorship Years in Business:
Type of Business: Current Yrs Revenue: \$ Net Income: \$
Last Year's Revenue: \$ Net Income: \$ # of Employees:

Principals:

1) Guarantor: Title: Social Security #:
Home Address: City: ST: Zip:
Home Phone #: Cell Phone Date Of Birth:
Personal Net Worth: \$ Annual Salary: \$ % of Ownership:
2) Guarantor: Title: Social Security #:
Home Address: City: ST: Zip:
Home Phone #: Cell Phone Date Of Birth:
Personal Net Worth: \$ Annual Salary: \$ % of Ownership:

Equipment Vendor: Phone:

Contact Address:

Equipment Description:

New [] Used [] Term (Mos.): Equipment Cost \$

CREDIT LINE INFORMATION

YES, I AM INTERESTED IN AN ADDITIONAL LINE OF CREDIT OF: \$25,000 \$50,000 \$100,000 \$

Bank: Address:

Contact: Phone: Checking Acct #:

PLEASE PROVIDE COPY OF LAST THREE (3) MONTHS BANK STATEMENTS (FRONT PAGE ONLY)

References: Secured/Equipment Financing or Leasing, Landlord or Mortgagor.

Company Name: Acct #
Contact: Phone
Company Name: Acct #
Contact: Phone

For the purpose of obtaining credit, I certify that the information given in this application and any attached schedules is true and correct and the preceding statements, correctly reflect our financial condition as of the date indicated below and that there has been no material change since then. I hereby authorize Hydroswing® North America Inc and its assigns to obtain business, as well as personal information regarding my credit history via banks, all trade references, credit reporting companies and any other extenders of credit in order to determine credit worthiness and, in addition, Hydroswing® North America Inc and its assigns has permission to call, mail, fax and email the above applicant. EACH GUARANTOR MUST SIGN BELOW

X Title: Date:

X Title: Date: