



SalonEquipment.Com Financial Services

P.O BOX 8718 Brea, CA 92822
(877) 461-2972 - FAX (714) 332-2973

LESSEE (EXACT LEGAL NAME) DBA
STREET ADDRESS CITY STATE ZIP TELEPHONE NO.
LOCATION OF EQUIPMENT CITY STATE ZIP FAX NO.
TYPE OF BUSINESS GROSS ANNUAL SALES YEARS IN BUSINESS YEAR UNDER CURRENT OWNER FEDERAL TAX ID NO. (IF ANY)
PROPRIETORSHIP CORPORATION PARTNERSHIP LIMITED LIABILITY CO. STATE OF INCORPORATION

OWNERSHIP

PRINCIPAL #1 NAME TITLE % OWNERSHIP YRS OF INDUSTRY EXPERIENCE SOCIAL SECURITY NO.
STREET ADDRESS CITY STATE ZIP HOME TELEPHONE NO.
PERSONAL ANNUAL GROSS INCOME (Not including spouse) MONTHLY MORTGAGE/RENT (Residence only)
PRINCIPAL #2 NAME TITLE % OWNERSHIP YRS OF INDUSTRY EXPERIENCE SOCIAL SECURITY NO.
STREET ADDRESS CITY STATE ZIP HOME TELEPHONE NO.
PERSONAL ANNUAL GROSS INCOME (Not including spouse) MONTHLY MORTGAGE/RENT (Residence only)

BANK

BANK NAME CONTACT NAME CITY CURRENT CHECKING BALANCE TELEPHONE NO.
ACCOUNT UNDER NAME OF CHECKING ACCOUNT NO. SAVINGS ACCOUNT NO. LOAN NO.

TRADES

COMPANY CONTACT TELEPHONE
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DESIRED TERMS (Check one)

LEASE TERM IN MONTHS
12 24 36 48 60
PURCHASE OPTION
\$1 10 FMV

EQUIPMENT DEALER

DEALER NAME
SalonEquipment.Com
CONTACT PHONE (877)461-2972
EQUIPMENT COST
EQUIPMENT TYPE
Salon Equipment

Fax completed application or mail to address above: ATTN: J.W.

FAX: (714) 332-2973

TEL.: (877) 461-2972

The undersigned individual who is either a principal, a personal guarantor or a sole proprietorship of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents and authorizes Salon Equipment.Com or its designee the use of a consumer credit report on the undersigned, from time to time as may be needed.

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AUTHORIZED SIGNATURE

DATE

ADDITIONAL INFORMATION

If the business has been in operation under present ownership for less than two years, or equipment cost exceeds \$75,000 please provide:

*Financial Statements or Tax Returns on Company for most recent two years and most recent Interim Financial Statement.

Please include an itemized quote, if available.