



12124 Riverwood Dr.
Burnsville, MN 55337

(952)-894-2520

(952) 894-2524 (FAX)

COMMERCIAL LEASE APPLICATION

WWW.TSBLDIST.COM

APPLICANT BUSINESS INFORMATION	COMPANY LEGAL NAME & DBA IF APPLICABLE (PLEASE WRITE BELOW)								
	BILLING ADDRESS	STREET	CITY & STATE		ZIP CODE	COUNTY			
	DELIVERY ADDRESS	STREET	CITY & STATE		ZIP CODE	COUNTY			
	TELEPHONE:	FAX:		EMAIL ADDRESS:					
	CONTACT:			WEBSITE:					
	DATE INCORPORATED:	YEARS IN BUSINESS:		<input type="checkbox"/> PROPRIETORSHIP		<input type="checkbox"/> PARTNERSHIP		<input type="checkbox"/> CORPORATION <input type="checkbox"/> LLC	
	NATURE OF BUSINESS:				FEDERAL TAX ID #				
GUARANTOR INFORMATION	NAME		TITLE	SS#	HOME PHONE		% OWNED		
	ADDRESS								
	PREVIOUS ADDRESS (IF LESS THAN TWO YEARS):								
	NAME		TITLE	SS#	HOME PHONE		% OWNED		
	ADDRESS								
	PREVIOUS ADDRESS (IF LESS THAN TWO YEARS):								
BUSINESS BANK INFORMATION	BANK NAME	ACCOUNT #	TELEPHONE	OFFICER	DATE OPENED	<input type="checkbox"/> CK <input type="checkbox"/> SV <input type="checkbox"/> CD <input type="checkbox"/> LOANS			
TRADE REFERENCES	FIRM NAME	TELEPHONE	FAX	OFFICER	CITY & STATE	HOW LONG?	HIGH CREDIT		
VENDOR EQUIPMENT INFORMATION	VENDOR NAME:								
	ADDRESS:			CITY & STATE:			ZIP CODE:		
	PHONE	FAX	CONTACT		WEBSITE				
	EQUIPMENT TO BE LEASED:				COST (WITHOUT TAXES)				
	<input type="checkbox"/> NEW <input type="checkbox"/> USED (IF USED, YEAR MANUFACTURED)		LEASE TERMS:			MONTHLY PAYMENT:			

The undersigned represents that all information provided with this Application is true and correct and hereby authorizes TriQuest Capital to obtain from third parties, information it deems necessary to arrive at a decision regarding this Application. To help fight terrorism and money laundering, the information you provide will be verified. By signing below, the undersigned individual(s) as principal of and/or guarantor for the applicant, authorizes TriQuest Capital, its designee, assigns or potential assigns, to review his/her personal credit profile provided by a national credit bureau in considering this Application and for the purpose of update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. The undersigned authorizes all deposit, borrowing, financial and trade information to be released to TriQuest Capital by telephone or fax. A photocopy or fax of this authorization shall be valid as the original.

X _____
Signature Print

Date

X _____
Signature Print

Date