

LPI SOFTWARE FUNDING GROUP, INC.

CREDIT APPLICATION

Phone (800) 394-4574

Fax (610) 687-4215

BACKGROUND INFORMATION

Legal Name: _____ Phone #: _____
 Address: _____ Fax #: _____
 City/State/Zip: _____ Years in Business: _____
 Contact Officer/Title: _____ State of Incorporation: _____
 Billing Contact: _____ Number of Employees: _____
 Organization Type: Corporation: _____ Sub S. Corp: _____ Partnership: _____ Proprietorship: _____ (select one)
 Type of Business (Industry/Product): _____ Private OR Public Corp? _____
 D&B Rating: _____ Duns NO: _____ Tax ID #: _____
 If Privately Held, please supply us with your most recent year-end and interim financial statements.
 If Privately Held, List Majority Stockholders:

Name	Address	City/State/Zip	Social Security #	% Ownership
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____

BANK/TRADE INFORMATION

Bank Name: _____ Bank Phone#: _____
 Account Officer: _____ Checking Account Number: _____
 Borrowing Relationship? (Yes/No) _____

SUPPLIER INFORMATION

Name	Contact	Phone #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

LEASE REQUEST

Item(s) Subject to Lease: _____
 Cost: _____ Term Requested: _____ Years
 Payment Frequency: (Annual/Quarterly/Monthly) _____ Other (explain): _____

The Undersigned states that all of the above statements are true and complete and are made in support of this Lease Application. The Undersigned further authorizes LPI Software Funding Group to obtain from any source information concerning the credit standing of the applicant.

SIGNATURE

TITLE

DATE

The Undersigned authorize LPI Software Funding Group to obtain from any source, information concerning their credit standing as guarantors or otherwise.

SIGNATURE

TITLE

SIGNATURE

TITLE