



Capital™

Complete and Fax To:
1-618-939-9808

Questions?
1-877-WELDNOW
(1-877-935-3669)
e-mail: weldnow@htc.net

FINANCING MADE EASY

Equipment Lease Application

Company Information (Complete Legal Name of Entity)

Company: _____ FEIN: _____
 D/B/A: _____ (If applicable)
 Mailing / Business Address: _____ County: _____
 City / State / Zip: _____ eMail: _____
 Phone #'s: Office: (____) _____ - _____ Point of Contact: _____
 Fax: (____) _____ - _____ Cell: (____) _____ - _____
 Years in Business Under Current Ownership Structure: _____ Years Date of Incorporation: _____
 Check Entity Type: _____ Corporation _____ LLC _____ Partnership _____ Proprietorship _____ Non-Profit _____ Municipality
 Tax Exempt? _____ YES _____ NO (If YES, please submit a copy of your tax exemption certificate with the application)
 Nature of Business: _____
 Insurance Agency: _____ Agent Phone: (____) _____ - _____

Information on Principals / Partners with 25% or more Ownership in Company

	(1)	(2)	(3)
Name:			
Home Address:			
City / State:			
Zip Code:			
Home Telephone:			
Soc. Security Number:			
% Ownership / Title:			

References

Bank Name	Acct #	Phone #
Trade Reference & Comparable Loan/Lease	Acct #	Phone #

Distributor and Equipment Information

Equipment: _____
 Please Check One: New Used Demo
 Total Cost of Equipment: \$ _____ Including Shipping, Installation, etc. but NOT Tax
 Distributor: _____ Phone #: (____) _____ - _____
 Location: _____ Fax#: (____) _____ - _____
 Salesperson: _____ Cell #: (____) _____ - _____
 Equipment Location when in use: Check if same as above. Otherwise, enter street address / city / state / zip below:

Select Lease Terms Below

LEASE PLAN No Down Payment (Advance: First Only 12 & 18 / First and Last 24-72)
 Term Requested: _____ 12 _____ 18 _____ 24 _____ 36 _____ 48 _____ 60 _____ 72 Months
 Buyout Option: _____ Fair Market Value _____ 10% Option _____ \$1 Option

Credit Authorization

I/We hereby authorize you, to whom this application is made, your designee, assigns or potential assigns, to obtain business, as well as personal information regarding my credit history via banks, personal credit profile provided by national credit bureaus, trade references and any other third parties for the purpose of considering this Application, its update, renewal or extension of credit or the collection of any resultant accounts. The resulting information may be made available to the Distributor as needed for approval of the transaction. I/We hereby warrant that the information submitted is true and correct. A fax or photocopy of this authorization is valid as the original. I understand and authorize that my information will be made available to Lincoln Electric Company and Williamsburg Financial Group, Inc., as well as Williamsburg Financial Group, Inc.'s leasing partners.

(1) _____ Printed Name: _____ Date: _____
 (2) _____ Printed Name: _____ Date: _____
 (3) _____ Printed Name: _____ Date: _____

*Lincoln Electric Capital plans available to U.S. residents only.
 Lincoln Electric Capital plans not available to consumers.*