

SINCE 1992

VENDOR PARTNER APPLICATION



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Att: Mike Elton (melton@advantageleasing.com)
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COMPANY INFORMATION

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Business name:								
Phone:		Fax:		E-mail:				
Company address	s:							
City:		State:	State:		ZIP Code:			
How long in business?		State	State of incorporation:		Date of incorporation:	Date of incorporation:		
Sole proprietorship:	Partnership	Corpo	ation: Other:		Fed. Tax ID:			
Owner:		Title:	Title:					
SSN:		Cell:						
Website:		Owner E-mail address:						
BUSINESS INFORMATION								
Type of equipment you sell:								
Annual sales: Equip		ment cost range:						
Cost of average % of system:		systems leased:						
Other leasing companies used: Number of sales staff:								
			В	ANK INFORMATION				
Primary bank name:		Bank contact:						
City:		State:	State: Phone:					
MANUFACTURER/SUPPLIER TRADE REFERENCE INFORMATION								
Company name:								
Phone: Fax:			E-mail:					
Company name:								
Phone: Fax:			E-mail:					
MARKETING OPTIONS								
Check which partner finance tool you would like to request								
FIGURE CONTROL								

[] QUICK LINK: Small "financing available" graphic on your website which opens a new window to get an instant lease quote or apply for financing with an online lease application.

[] CUSTOM BRANDED LINK: "FINANCING AVAILABLE" graphic on your website which opens a new window, with your branding on it, to get an instant lease quote or apply for financing with an online lease application.

AGREEMENT

By signing this form, you authorize Advantage Leasing Corporation or any credit bureau or any investigative agency employed by Advantage Leasing Corporation to investigate the references herein listed or statements or other data obtained from you or from any other person pertaining to your credit and financial responsibility.

AUTHORIZED SIGNATURE							
Name:	Title:	Date:					