



Member FDIC

126 N. Broad Street
 Lanark, Illinois 61046
 (815) 493-2631
 FAX (815) 493-2082

LEASE APPLICATION

PLEASE COMPLETE THE FOLLOWING CREDIT INFORMATION

Organization Type		<input type="checkbox"/> Corporation	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership
Name(s)			Address	
City	State	Zip	County	Phone
Social Security Number of Fed. ID Number	Date of Birth or Incorporation	Number of Dependents	Spouse	Years in Business

EQUIPMENT

Description _____

Cost of Equipment _____ Lease Term (Months) _____

Rental Payment Factor _____ Amount of Rental Payment _____

Vendor Name & Address _____

FARM / FINANCIAL INFORMATION *(Please complete for all equipment costs of \$10,000 or more)*

Number of Acres		Source of Other Income	
Owned: _____	Rented: _____	Cultivated: _____	Irrigated: _____
Annual Income (Last year actual & This year estimate)		Livestock	
This Yr. Crop: \$ _____	Livestock: \$ _____	Other: \$ _____	Head: _____ Type: _____
Last Yr. Crop: \$ _____	Livestock: \$ _____	Other: \$ _____	Head: _____ Type: _____
Assets		Liabilities	
Cash on Hand and in Bank	\$ _____	Operating Lines of Credit	\$ _____
Savings		Owed on Equipment	
Stocks, Bonds, & CDs		Owed on Autos & Trucks	
Notes & Accounts Receivable		Owed on Real Estate Mortgages	
Property Owned (Estimated Value)		Owed on Real Estate Mortgages	
Machinery & Equipment		Other Secured Liabilities	
Autos: # _____ Trucks: # _____		Other Unsecured Liabilities	
		Total Liabilities	\$
		Owner's Equity	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES & OWNER'S EQUITY	\$

REFERENCES

	City	Contact	Phone No.
Bank _____	_____	_____	_____
Checking Account No. _____			
Bank _____	_____	_____	_____
Trade _____	_____	_____	_____
Trade _____	_____	_____	_____
Trade _____	_____	_____	_____

Have you ever filed Bankruptcy? Yes No

Are you co-signed or jointly liable for other debts? Yes No

Suits/Judgements against you? Yes No

Applicant authorizes the release of any credit information including credit reports, loans, accounts, purchases or other financial transactions to Exchange State Bank and/or its funding sources. Applicant warrants that the information provided above is true and correct.

Applicant _____

Date _____

Applicant _____

Date _____