

American Leasefund, Inc.

BROKER APPLICATION

COMPANY INFORMATION			
Company Name:			
DBA:		Fed. Tax ID #:	
Address:			
City:		State:	Zip:
Contact:		Title:	
Phone:		Fax:	
Website:		Email:	
PRINCIPAL INFORMATION			
Principal Name:		SSN:	
Driver's License #:		State:	Phone:
Address:			
City:		State:	Zip:
Principal Name:		SSN:	
Driver's License #:		State:	Phone:
Address:			
City:		State:	Zip:
Principal Name:		SSN:	
Driver's License #:		State:	Phone:
Address:			
City:		State:	Zip:
BANK INFORMATION			
Name:		Contact:	Phone: Acct #:
BROKER PROFILE			
Time in Business:		Yrs. Under Current Ownership:	# of Vendors You Work With:
Target/Niche Industries:			
Association Membership:		NAELB	NEFA UAEL ELA
Monthly Transaction Volume:		Average Number of Deals Per Month:	Average Dollar Amount Per:
CURRENT FUNDING SOURCES			
Company:		Contact:	Phone:
Company:		Contact:	Phone:
Company:		Contact:	Phone:
AUTHORIZATION			
I hereby certify that all of the information contained herein or attached hereto is complete and accurate to the best of my knowledge. I authorize American Leasefund, Inc. and any agencies acting on its behalf to verify any of the information from any source it deems appropriate, including but not limited to, any available consumer reporting agencies. I further authorize any of the above to release information to American Leasefund, Inc. This authorization shall remain in effect for the duration of the Broker application process and any established Broker relationship, and shall be valid for both the company and the individuals listed herein.			
Date: _____		Signature: _____ Print Name: _____	
Date: _____		Signature: _____ Print Name: _____	
Date: _____		Signature: _____ Print Name: _____	