



102 Colony Drive, Suite 800 Cumming, GA
 30040 Office: 770.888.9981
 Fax: 770.887.5567
 credit@charabancfinancial.com

INTERNAL USE
App #: _____
Sales Rep: _____

CHURCH CREDIT APPLICATION

The business equipment you are acquiring can be leased (subject to acceptance by CHARABANC) under the following terms:

TOTAL EQUIPMENT COST: \$ _____ Term: ___ mos. Rate Factor Used: _____
 Monthly Payment (plus applicable taxes): \$ _____
 Advance Rentals: \$ _____ Purchase Option: _____
 Security Deposit: \$ _____ Other: _____

EQUIPMENT BEING LEASED (include quantity, make, model, serial number and accessories)

CHECK HERE IF EQUIPMENT IS USED:

Equipment Location (if different than below.) _____
Street City/County State Zip

CHURCH INFORMATION

MAY WE CONTACT LESSEE IF ADDITIONAL INFORMATION IS NEEDED? YES NO

Church Name: _____

Address: _____
Street City County State Zip Contact Name

E-mail: _____ Internet Address: _____

Phone: _____ Fax: _____ Years in Existence: _____ Church Incorporated? : Yes No

BANK INFORMATION

Name of Bank: _____ Bank Officer: _____

Phone: _____

Deposit/Check Acct #: _____ Loan Acct #: _____

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MORTGAGE OR LEASE REFERENCE

Contact: _____

Name of Supplier: _____

Address: _____

Phone: _____

VENDOR INFORMATION

DEALER GROUP CODE: _____

Name: _____

Contact: _____

Address:

Street	City	Country	State	Zip
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Phone: _____ Fax: _____ E-mail: _____

The person(s) supplying the above information certifies to CHARABANC, LLC that it is true and correct. The Guarantors recognize that their individual credit histories may be a factor in the evaluation of the lease applicant and, thus, authorize CHARABANC, LLC or its designee to investigate their personal credit status. This includes obtaining and using their consumer credit reports from time to time in the credit evaluation and collection processes.

Church-NJ-R0704 _____

X _____

Please Fax or Email form to CHARABANC
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