

Fine Art Leasing

14525 Highway 7, Suite 350
 Minnetonka, MN 55345
 Phone (888) 230-0057 Fax (952) 400-8854

CREDIT APPLICATION

contact: John Turnham

Legal Business Name				Phone
Address	City	State	Zip	Fax#
Location of Art if other than above				Email Address
Nature of Business	Years in Business	No. of Employees		Federal Tax ID #
Name of Corporate President	Corp. Type (S,C,LLS, etc)	Date of Incorporation		County
Insurance Agency Name	Contact	Phone		
Principal or Officer	Title	% Own		Social Security #
Home Address	City	State	ZIP	Home Phone #
Principal or Officer	Title	% Own		Social Security #
Home Address	City	State	ZIP	Home Phone #
Primary Bank (Checking)	Phone #	Account #	Date Open	Contact Officer
Other Bank	Phone #	Account #	Date Open	Contact Officer
Trade & Lease/Loan References	Phone #	Account #		Contact
Vendor Name			Sales Rep Name & Phone #	
Art Description			Art Cost	Lease Term Desired
<p>By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Fine Art Leasing or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purpose of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat of facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual/s identified in the above application.</p>				
<p>Release: I hereby authorize the above banks and references to release credit information to any inquiring funding source.</p>				
<p>Authorized Signature: _____</p>				