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## CREDIT APPLICATION

### LESSEE - Important: List the legal name of entity

Company	Website	Email
Phone	Fax	Contact
Title		
Billing Address	City	State
Zip		
Check One	<input type="radio"/> Non-profit	<input type="radio"/> Corporation
	<input type="radio"/> Partnership	<input type="radio"/> Proprietorship
Federal Tax ID#	Business Established Under Current Ownership : Years	Months

### EQUIPMENT LOCATION - Complete only if equipment will not be located at lessee's address

Address	City	County	State	Zip
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### OFFICERS, PARTNERS AND GUARANTORS - Attach additional sheet if needed

1. Legal Name	% Ownership	Title	Social Security Number
Home Address	City	State	Zip
Date of birth	Email Address		
2. Legal Name	% Ownership	Title	Social Security Number
Home Address	City	State	Zip
Date of birth	Email Address		

### TRADE REFERENCES Two year history (Important to establish high credit and payment history - no COD accounts)

1. Supplier	Phone	Account #	Contact Person
2. Supplier	Phone	Account #	Contact Person
3. Supplier	Phone	Account #	Contact Person
4. Supplier	Phone	Account #	Contact Person

### BANK REFERENCES Two year history (Important to establish loan history)

1. Bank	Branch	Phone#	Checking Account#
Loan Officer	Loan Account#	Opening Date	
2. Leasing Company	Phone#		
Leasing Account#	Contact Person		

### EQUIPMENT TO BE LEASED- Attach additional sheet if needed

Description									
<input type="radio"/> New	<input type="radio"/> Used	Soft Costs	%	Total Costs \$					
Term (months)	<input type="radio"/> 24	<input type="radio"/> 36	<input type="radio"/> 48	<input type="radio"/> 60	Monthly Rental \$	Deferred Payments?	<input type="radio"/> Yes	<input type="radio"/> No	
Equipment Supplier									
Address	City	State	Zip						
Rep Name	Phone	Fax							

### PURCHASE OPTION

Check one	<input type="radio"/> \$1.00 Buyout	<input type="radio"/> 10%	<input type="radio"/> Fair Market Value
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By signing below, the undersigned individual as principal of and/or guarantor for the applicant, authorizes Broker/Lessor, its designee, assigns or potential assigns, to review his/her personal credit profile provided by national credit bureaus in considering this Application and for the purpose of the update, renewal, or extension of credit to the Applicant or the collection of any resultant accounts. A fax or photocopy of this authorization shall be valid as the original.

Lessee Signature \_\_\_\_\_ Date \_\_\_\_\_