

VENDOR: \_\_\_\_\_ **HARRIS LEASING COMPANY** DATE: \_\_\_\_\_  
 SALESPERSON: \_\_\_\_\_ **CREDIT APPLICATION** EQUIP: \_\_\_\_\_  
 PHONE #: \_\_\_\_\_ 713-783-7820 (TEL) COST: \_\_\_\_\_  
 FAX # \_\_\_\_\_ 713-783-7813 (FAX) TERM: \_\_\_\_\_

www.harrisleasing.com

LESSEE: \_\_\_\_\_ BILL: \_\_\_\_\_  
 DBA: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 CITY, STATE/ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 Location: \_\_\_\_\_ FAX: \_\_\_\_\_  
 Yrs. in Business: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_  
 Type of Business: \_\_\_\_\_ WEBSITE ADDRESS: \_\_\_\_\_  
 PROP: \_\_\_\_\_ PART: \_\_\_\_\_ CORP: \_\_\_\_\_ NP: \_\_\_\_\_ (IF CORP, How Many Yrs. Incorporated \_\_\_\_\_)  
 STATE OF INCORPORATION \_\_\_\_\_ CORPORATE CHARTER No. \_\_\_\_\_

**\*\*\*\* (ALL COMPANIES LESS THAN 5 YEARS OLD, ALL PROPRIETORSHIPS, PARTNERSHIPS AND CLOSELY HELD CORPORATIONS PERSONAL CREDIT INFORMATION IS REQUIRED ON PAGE TWO) \*\*\*\***

**BANK REFERENCES** (Company and/or Personal – If account is less than 2 yrs. please show previous banking)

Bank Name	Phone #	Officer's Name	Account / Loan #'s
1.			
2.			

**BUSINESS LANDLORD** (Or Mortgage Holder)

Name	Contact	Phone #
1.		

**TRADE REFERENCES/SUPPLIERS** (Comparable credits if possible)

Name	Phone #	Contact	Account #
1.			
2.			
3.			
4.			

**AUTHORIZATION:**

I, \_\_\_\_\_, authorize any credit agency to release to Harris Leasing Company and/or it's agents any information requested concerning personal or company credit standing. This information may be released over the telephone, in writing, or by fax. I hereby further authorize any photocopy of this release.

SIGNATURE/TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

**ON ANY AMOUNT OVER \$10,000.00, MOST CURRENT, DATED AND SIGNED FINANCIAL STATEMENTS AND LAST TWO YEARS INCOME TAX RETURNS ARE REQUIRED.**

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, or age (provided the applicant has the capacity to enter into a binding contract); or because all or part of the applicant's income derives from any public assistance program or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580. All information provided on this form to Harris Leasing Company will be kept confidential and secure in order to safeguard your nonpublic personal information as in compliance with the provisions in Title V of the Gramm-Leach-Bliley Act.

# **HARRIS LEASING COMPANY CREDIT AUTHORIZATION FORM**

713-783-7820 (TEL) 713-783-7813 (FAX) [www.harrisleasing.com](http://www.harrisleasing.com)

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**PLEASE DUPLICATE FOR EACH OWNER**

<b>Full Name:</b>			<b>% of Business Ownership:</b>
<b>Home Address:</b>		<b>City:</b>	<b>Years at Present Address:</b>
<b>Zip:</b>	<b>County:</b>		<b>Driver's License #</b>
<b>Home Phone #</b>		<b>Cell Phone #</b>	<b>Social Security #</b>
<b>Personal E-Mail:</b>			<b>Date of Birth:</b>
<b>Personal Bank Ref 1:</b>	<b>Bank Phone #</b>	<b>Officer's Name</b>	<b>Account / Loan#'s</b>
<b>Personal Bank Ref 2:</b>	<b>Bank Phone #</b>	<b>Officer's Name</b>	<b>Account / Loan#'s</b>
<b>Spouse Name / Employment/ Phone #:</b>			
<b>Personal Reference: Name/Address/Phone #:</b>			

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<p>I, _____, authorize any credit agency to release to Harris Leasing Company and/or it's agents any information requested concerning personal or company credit standing. This information may be released over the telephone, in writing, or by fax. I hereby further authorize any photocopy of this release.</p> <p>SIGNATURE/TITLE: _____ DATE: _____</p>
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