



All-Lines Leasing
Simple. Like financing should be.

Municipal Application

Municipality Information

Legal Name of Lessee

Address

City

State

Zip

Municipality Contact Information

Contact Person 1

Title

Phone

Fax

Email

Contact Person 2

Title

Phone

Fax

Email

Equipment & Finance Information

Total Cost of Equipment

Advance Payment

Amount to Finance

Term (Years)

Delivery Date

Payment

Payment Schedule

Monthly Annual Semi-Annual

What fund will the payments be made from :

General

Special

Other ()

Have you ever been in Default or Non-Appropriated on a Municipal Lease :

Yes No

Is your organization Bank Qualified?

Yes No

Vendor Information

Completed By

Title

Vendor Name

Vendor Contact

Vendor Email

Vendor Phone

Vendor Fax

Equipment Cost

Equipment Description:

Submit Completed Credit Application to All-Lines Leasing



All-Lines Leasing
Simple. Like financing should be.

Fax Completed Apps To: (800) 288-4959

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