## **TEAM Equipment Leasing BROKER ENROLLMENT FORM**

## TURN YOUR "C" CREDITS INTO APPROVALS

"We Approve C-Credit Leases for the Broker Community"

Company Name/DBA						Co	Company Type (Mo/Yr)  Corporation Partnership Established  Proprietorship				
Address						# Em	# Employees   D		Description of Business		
City			State	Zip		Cont	Contact		Title		
Phone			Fax		Emai	Email					
State Incorporated			Federal Tax ID#:			Website					
Owner/s	Shareho	lder Information	n								
First Name	Initial Last Name Title					Social Security Number					
Address				City					Zip	Zip	
First Name	Initial	Last Name	Title		Social S			Security Number			
Address	<u> </u>	City				State	Zip				
Bank R	eference	2)									
Bank Name					Phone		Fax		Date Open		
Contact						Account #1			Account #2		
Funder	Referen	ces									
Company Name						Phone	Phone		Fax Date Ope		
Contact						Accou	Account #		Average Ticket		
Company Name						Phone	Phone			Date Open	
Contact						Accou	Account #		Average Ticket		
Forecas	ted mon	thly lease volur	me: # of T	rans	sactions:		Avg	. Ticket			
Signatu	re:				Title	e:					