

ENTITY INFORMATION					
Entity Name*					
Entity Type* (please check one) <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipal <input type="checkbox"/> Other:					
Date Founded*			Federal Tax ID #		
Billing Address*		City*	State*	Zip Code*	County or Parish*
Equipment Address (if different from above)		City	State	Zip Code	County or Parish
Exempt from Sales Tax <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter Sales Tax Exempt #					
Exempt from Personal Property Tax <input type="checkbox"/> Yes <input type="checkbox"/> No Is your revenue less than \$50 Million? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Contact*		Email		WEF Customer Number (if current customer)	
Phone Number*		Cell Number*		Fax Number	
AUTHORIZED SIGNOR INFORMATION					
First Name*		Last Name*		Suffix (i.e. Jr, Sr, II, III)	
Title*		Phone Number		Email	
EQUIPMENT INFORMATION					
Vendor Name		Contact		Phone Number	
				Requested Term (in months)	
Type of Equipment (please be as specific as possible or include a copy of the quote or invoice)*					
Year	Make	Model	Description	<input type="checkbox"/> New <input type="checkbox"/> Additional Equipment <input type="checkbox"/> Used <input type="checkbox"/> Replacement Equipment	
Equipment Cost*		Amount of Trade-In*	Amount Owed on Trade-In*	Cash Down Payment*	Amount to be Financed*
Purpose of Use*				Essential Use?*	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Anticipated Equipment Order Date			Anticipated Delivery Date		
TERMS AND CONDITIONS					
<p>For purposes of obtaining credit, I (We) certify that all of the information in this application is true and correct. I (We) authorize Western Equipment Finance (Western), a division of Western State Bank, and/or its designees to confirm all information in this application (which may include obtaining credit reports, contacting references, etc.) either in connection with my (our) initial application for credit, or at any time during the term of the lease/finance agreement. I (We) agree to release and waive all claims against Western and those references listed above for all acts or omissions that occur in verifying the same information.</p> <p>Customer Identification Program: To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means to you: when you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license and other identifying documents.</p>					

Signature

Title

Date

*Denotes required field