

IN ONE AFFORDABLE MONTHLY PAYMENT

Our CashPlus Equipment Financing Program helps you finance the equipment you need and gives you the cash to pay for it! This new program lets you receive up to 50% of your total financed amount... IN CASH. You can use your cash payout for anything your business needs. Best of all, you repay your equipment purchase and cash funds with one combined affordable monthly payment.

Get the CashPlus Advantage:

- Cash payout up to 50% of the equipment financed amount
- Maximum cash payout of \$50,000
- Cash portion funded the day your contract commences
- Repayment terms up to 72 months
- No restrictions on how funds can be used.



Get the CashPlus Pre-Approved Now!

One Finance Payment for Equipment and Cash...
The Easiest Way to Grow Your Business.



FILL OUT THE APPLICATION ON THE BACK OF THIS SHEET!

We appreciate your interest, CONTACT US TODAY

Logan Harrell 704.900.4133 Lharrell@goleasing.com





OWNERSHIP INFO

ATT T: 704 900 4133

BUSINESS NAME								TELEPHONE			
STREET ADDRESS							FAX				
CITY./STATE/ZIP				COUNTY			MOBILE				
TYPE OF BUSINESS	PE OF BUSINESS BUSINESS		START DATE YRS UNDE OWNERSHI		RS UNDER CI WNERSHIP	FED. TAX I.D.		.D.			
LOCATION OF EQUIPMENT (STREET/CITY/STATE/ZIP/COUNTY)				'			HAS COMPANY/OWNER(S) EVER DECLARED BANKRUPTCY?				
CONTACT NAME EMAIL ADD			RESS			ANNUAL SALES			EXEMPT FROM STATE SALES/USE TAX?		
PROPRIETORSHIP PARTNERSHIP C-CORP S-CORP LLC STATE OF INCORPORATION											
By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, authorizes lessor and/or debtor and their affiliates, successors or its designee (and any assignee or potential assignee thereof) to obtain consumer credit reports relating to his/her individual credit history and/or creditworthiness. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or colleging the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/we affirm my/our identity as the respective individual(s) identified in this application.											
PRINCIPAL'S NAME	PRINCIPAL'S NAME					TITLE	% OF OWNERSHIP		SOCIAL SECURITY NUMBER		
DATE OF BIRTH	MOBILE P	MOBILE PHONE EMAIL				DDRESS					
HOME ADDRESS (STREET)	HOME ADDRESS (STREET) (CITY) (STATE) (ZIP CO				DE)	SIGNATURE:					
PRINCIPAL'S NAME						TITLE	% OF OWNE	RSHIP	SOCIAL SE	ECURITY NUMBER	
DATE OF BIRTH	MOBILE PHONE EMA				EMAIL AD	DDRESS					
HOME ADDRESS (STREET) (CITY) (STATE) (ZIP COD				DE)	SIGNATURE:						
PRINCIPAL'S NAME						TITLE	% OF OWNE	RSHIP	SOCIAL SE	CURITY NUMBER	
DATE OF BIRTH	MOBILE PHONE EMAIL				EMAIL AD	DDRESS					
HOME ADDRESS (STREET)	E ADDRESS (STREET) (CITY) (STATE) (ZIP CODE)					SIGNATURE:					
PRINCIPAL'S NAME						TITLE	% OF OWNE	ERSHIP	SOCIAL SE	ECURITY NUMBER	
DATE OF BIRTH	MOBILE PHONE EM				EMAIL AD	DDRESS					
HOME ADDRESS (STREET)	(CITY) (STATE) (ZIP CODE) SIGNATURE:										
Includ	е сору с	of first pa	age of co	mpar	ıy's mos	st recent 3	months	s bank s	stateme	ents.	
LOAN/LEASING COMPANY	LOAN/LEASING COMPANY			ORIGINAL LOAN/LEASE AMOUNT				TELEPHONE			
START DATE (MONTH/YEAR)			TERM/MONTHLY PAYMENT			ACCOUNT NUMBER					
LOAN/LEASING COMPANY			ORIGINAL LOAN/LEASE AMOUNT			TELEPHONE					
START DATE (MONTH/YEAR)			TERM/MONTHLY PAYMENT			ACCOUNT NUMBER					
EQUIPMENT COST (EXCLUSIVE OF SALES TAX)			TERM				PAYMENT				
SUPPLIER OF EQUIPMENT			CONTACT				PHONE NUMBER			NEW USED IF USED, YR. OF MFGR.	
EQUIPMENT DESCRIPTION (MFG., MODLE NUMBER., S/N, - ATTACH SALES ORDER IF AVAILABLE)											

CREDIT RELEASE AUTHORIZATION

I hereby certify that the information contained in this lease application is true and accurate and I hereby authorize our banks, trade references, and financial institutions the right to release credit information. In states where permissible, I hereby authorize the filing and recording of UCC financing Statements showing the Secured Party's interest in the equipment and grant the Secured Party the right to execute Lessee's/debtors name thereto. A photostat copy of this authorization shall be as valid as the original.

GNATURE	TITLE	DATE
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payer identification number that will allow us to identify you. We may also ask to see other identifying documents.

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, age (provided the applicant has the capacity to enter into a binding contract), 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 is the Federal Trade Commission Equal Credit Opportunity, Washington, D.C. 20580. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Lessor set forth above within 60 days from the date you are notified or our decision. We will send you a written statement of reasons for the denial within 30 days for receiving your request for the statement. Notice: To help the government fight the funding of terrorism and money laundering activities, U.S. Federal law requires financial institutions to obtain, verify and record information that identifies each person (individuals or businesses) who opens an account. What this means for you: When you open an account or add any additional service, we will ask you for your name, address and tax-