

Lessee Information			Industry Code (Internal Use)		
Legal Business Name:	Trade Name/DBA Parent Company/Franchise:	Date Bus. Estab.:	Tax ID Number:		
Corporation:	Financial Statement Type: <input type="checkbox"/> Audited <input type="checkbox"/> Reviewed	Lease amount up to: \$			
Physical Address:	City:	State:	Zip:	Phone:	
Billing Address: (if other than above)	City:	State:	Zip:	Phone:	
State of Organization:	Email Address:	Phone:	# of Vehicles in Fleet:		

Principals/Owners (20% and over)					
Name:	Title:	% Ownership:	Name:	Title:	% Ownership:
Name:	Title:	% Ownership:	Name:	Title:	% Ownership:

Guarantor or Co-Lessee					
Individual Applicant (First Name, Middle Initial, Last Name)			Social Security No:		Date of Birth:
Present Address (Number and Street)			City:	State:	Zip:
Home Phone:	<input type="checkbox"/> Own/Buying <input type="checkbox"/> Living with Relative <input type="checkbox"/> Rent/Lease <input type="checkbox"/> Other		Monthly Mortgage/Rent Payment:		Driver's License No. & State:
Alternate Phone (Cell, Pager)	Employer Name & Address:			Main Business Phone #:	Time on Job: ___ Yrs. ___ Mos.
Annual Income: \$	Other Income: \$	Source:	Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.		Total Gross Annual Income: \$

Guarantor or Co-Lessee					
Individual Applicant (First Name, Middle Initial, Last Name)			Social Security No:		Date of Birth:
Present Address (Number and Street)			City:	State:	Zip:
Home Phone:	<input type="checkbox"/> Own/Buying <input type="checkbox"/> Living with Relative <input type="checkbox"/> Rent/Lease <input type="checkbox"/> Other		Monthly Mortgage/Rent Payment:		Driver's License No. & State:
Alternate Phone (Cell, Pager)	Employer Name & Address:			Main Business Phone #:	Time on Job: ___ Yrs. ___ Mos.
Annual Income: \$	Other Income: \$	Source:	Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.		Total Gross Annual Income: \$

Summary and Income Verification	
<input type="checkbox"/> Personal and/or business tax returns (attached) <input type="checkbox"/> The Bancorp Bank Personal Financial Statement (attached) <input type="checkbox"/> Accountant-Prepared Personal Financial Statement (attached)	
<input type="checkbox"/> Personal Financial Statement prepared for another Financial Institution (attached)	Date of Personal Financial Statement: _____

Affirmation of Intent to Borrow/Guaranty	
<input type="checkbox"/> I intend to apply for individual credit.	Signature of Applicant: _____
<input type="checkbox"/> We intend to apply for joint credit.	Signature of Co-Applicant: _____

Important Information About Procedures for Opening a New Account	
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 customer who opens an account. What this means for you: When you open an account, we will ask your name, address, date of birth and other information that will allow us to identify you. We may also ask to see a copy of your driver's license or other identifying documents. This information is needed for any renewal, increase, or modification of your existing accounts at The Bancorp.	

Required Signatures	
I(We) certify that the information contained in this statement is complete, true and correct, and that I(we) have not withheld information that might be material in evaluating my(our) application for credit. I(We) acknowledge that knowingly giving false information for the purpose of inducing The Bancorp Bank to extend credit is a federal crime. I(We) agree to notify The Bancorp Bank of any material changes to the financial position described in this statement and to provide a then-current version of this statement at The Bancorp Bank's request. I(We) authorize The Bancorp Bank to make whatever inquiries it deems necessary in connection with my(our) credit application or in the course of review or collection of any credit extended in reliance on this financial statement. I(We) authorize any person or entity to compile and furnish to The Bancorp Bank any information it may have or obtain in response to such credit inquiries. The Bancorp Bank is authorized to share any credit information of any type that it has or may receive about me(us) with another creditor if the other creditor is involved in the financial transaction, such as a creditor that purchases or participates in any loan to me(us). The Bancorp Bank is authorized to answer any questions from others concerning my(our) credit experience with The Bancorp Bank.	
Signature of Applicant:	Date:
Signature of Co-Applicant:	Date: