



AVALON LEASING, INC.

Equipment Lease Application

132 ADAMS STREET
SUITE 1
NEWTON, MA 02458

TELEPHONE (888) 332-8007
FACSIMILE (888) 332-1660

Website: www.avalonleasing.com
E-Mail: info@avalonleasing.com

VENDOR/DEALER INFORMATION				
Vendor's Name QuadTech, Inc.		Contact/Sales Rep.	Telephone # (800) 253-1230	
Address 5 Clock Tower Place, Suite 210 East			Fax # (978) 461-4295	
City Maynard		State MA	Zip 01754	
PAYMENT PLAN				
Term in Months	Rate Factor Used	Lease Payment <small>(Does not include taxes)</small>	<input type="checkbox"/> FMV <input type="checkbox"/> 10% <input type="checkbox"/> \$1.00 Buyout	Advance Rentals \$
EQUIPMENT TO BE LEASED (Attach separate list if necessary.)				
Description (include make, model & serial #'s and any attachments)			Equipment Cost: \$	
			<input type="checkbox"/> New <input type="checkbox"/> Used	
LESSEE (Complete legal name of entity. If a corporation, use EXACT registered corporate name.)				
Company		DBA	Federal Tax ID#	
Billing Address	City	County	State	Zip
Nature of Business	Contact Person	Title	E-mail	
Telephone # ()	Type of Business	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Corp.	<input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Partnership	No. of yrs in Business <small>(present ownership)</small>
Fax# ()			<input type="checkbox"/> Non-Profit Corp.	
PERSONAL INFORMATION ON OFFICERS, PARTNERS OR GUARANTORS (Attach separate sheet if necessary.)				
Name	Title	% Ownership	Social Security No.	
Home Address	City	State	Zip	Home Phone No. ()
Name	Title	% Ownership	Social Security No.	
Home Address	City	State	Zip	Home Phone No. ()
TRADE REFERENCES — TWO YEAR HISTORY				
Name of Supplier	City/State	Telephone No. ()	Contact Person	
Name of Supplier	City/State	Telephone No. ()	Contact Person	
COMPANY BANK REFERENCES — TWO YEAR HISTORY				
Name of Bank/Branch	City/State	Chkg. Acct. #	Telephone No. ()	Contact Officer
		Loan Acct.#		
Name of Bank/Branch	City/State	Chkg. Acct. #	Telephone No. ()	Contact Officer
		Loan Acct.#		
ACKNOWLEDGMENT AND AUTHORIZATION				

By providing the above information, I/we authorize you or your agents to investigate my/our financial responsibility and creditworthiness. I/we authorize you to update my/our credit profile from time to time in the future as you deem appropriate.