

Credit Application

Date: _____

LESSEE

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 SSN: _____ DOB: _____
 Phone (h): _____ Cell : _____
 Phone (w): _____ Fax: _____
 Email: _____ Married? Yes No
 Residence: Own Rent How Long? _____
 Years Reporting: _____ Official / Freelance / Agency
 Business Name: _____
 Years in Business: _____ TIN: _____
 Proprietorship Partnership
 Corporation LTD Partnership
 LLC Non-Profit
 Lessee is also Guarantor? Yes No

Advantage Software, Inc.
 Advantage Technology
 925 Central Parkway, SE
 Stuart, FL 34994
 Contact: Advantage Rep/email: _____

Equipment Description

PRODUCT	COST
Eclipse CAT Software	\$
Passport Writer	\$
Other:	\$
Shipping	\$

Cost: \$ _____ Term: _____ months Advance Pmts: \$ _____

Additional Guarantor (if required)

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Own Rent How Long? _____ SSN: _____
 Phone: (H): _____ (C): _____
 Occupation: _____ Time at Present Occupation: _____
 Relationship to Lessee: _____

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Own Rent How Long? _____ SSN: _____
 Phone: (H): _____ (C): _____
 Occupation: _____ Time at Present Occupation: _____
 Relationship to Lessee: _____

Billing Address (if different from above)

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____

We hereby authorize the release of any and all credit information to Advantage Software, Inc. and its affiliates from the above listed references, and certify that all is true and correct to the best of my knowledge. The undersigned individual, recognizing that his or her individual credit history may be a factor in the evaluation of the credit application, hereby consents to and authorizes Advantage Software, Inc. its affiliates and any assignee, lender or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim that he/she would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent. A photocopy or facsimile copy of this authorization shall be valid as the original.

Lessee's Signature _____ Title: _____ Date: _____