CALEB ▲ PARKER
INVESTMENTS
EQUIPMENT LEASING & FINANCE DIVISION

SUBMIT APPLICATIONS BY FAX OR EMAIL
FAX: (713) 583-2644 **EMAIL:** APPS@CALEB-PARKER.COM
YOUR ANALYST: BRIAN GRAVES **VOICE DIRECT:** (713) 885-1111

CREDIT APPLICATION

(Please fill out completely)

CORPORATE NAME OR INDIVIDUAL'S NAME (EXACT LEGAL SPELLING)	TR Systems, LLC dba Diesel Laptops **VENDOR'S NAME (EQUIPMENT SUPPLIER)**
D/B/A TRADE NAME	4335 Augusta Hwy Address
Address	Gilbert SC 29054 City State Zip
City State Zip County	888-983-1975 Phone Fax
	sales@diesellaptops.com
Business Phone Business Fax	Contact/Rep. Direct/Cell Email Address
Contact Name Contact Cell Phone #	Email address to send contracts

Length of Time in Business under current ownership: _____ **Years &** _____ **Months** **Date Registered:** _____

When did this business originally start? _____ (Month / Year) ☐ Proprietorship ☐Corporation ☐LLC ☐LLP ☐LTD ☐Municipality

When did you take ownership of this business? _____ (Month / Year) Federal ID # _____ # Employees _____

Other Locations: _____

TIME SAVER NOTE: Be sure to include the (MONTH / YEAR) each location opened.

OFFICERS/OWNERS - Those authorized to sign lease and who are listed on business license, ALL Majority Stockholders with 10% or more ownership.

FULL NAME	TITLE	% OWNER	HOME ADDRESS / CITY/ STATE / ZIP	HOME PHONE	SOCIAL SECURITY #	HOME
						Own ☐
						Own ☐
						Own ☐

TIME SAVER NOTE: Be sure to include complete home address, zip code, home phone, and social security number.

EQUIPMENT REQUESTED TO BE LEASED

QUANTITY	NEW/USED (IF USED NEED AGE)	DESCRIPTION	MODEL	PRICE

What's your maximum down payment? **$** _____ Term Requested _____ Total Price **$** _____

EQUIPMENT LOCATION: _____

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 collecting 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.I/we further authorize our banks and trade institutions to release credit information to lessor either verbaly or by fax.

SIGNATURE: X _____ X _____ X _____

Applicant # 1 Applicant # 2 Applicant # 3