



First-Citizens Bank & Trust Company  
PO Box 29519 • Raleigh, NC 27626

## Business Lease Application

Print and Return by Fax to: 877.492.7081

(Incomplete information will cause delays. Please complete in full.)

### Business Profile

APPLICANT/BORROWER LEGAL NAME (IF APPLICABLE, DBA NAME)				TAX ID#	
STREET ADDRESS		CITY	COUNTY	STATE	ZIP CODE
MAIL ADDRESS		CITY	COUNTY	STATE	ZIP CODE
PHONE NUMBER	FAX NUMBER	CELL PHONE NUMBER	E-MAIL ADDRESS		
BUSINESS STRUCTURE PROPRIETORSHIP      PARTNERSHIP      CORPORATION      LLC      OTHER			DATE ESTABLISHED	GROSS ANNUAL REVENUES	
HOW LONG UNDER PRESENT MGMT	NUMBER OF EMPLOYEES	HOW MANY LOCATIONS/OFFICES?	Has the business ever been in receivership or filed for bankruptcy during the last 7 years? <input type="checkbox"/> YES <input type="checkbox"/> NO		
DESCRIPTION OF BUSINESS			IS THE BUSINESS A PUBLICLY TRADED COMPANY ON A US STOCK EXCHANGE?      YES      NO		
DOES THE BUSINESS OFFER ANY OF THESE SERVICES TO ITS CUSTOMERS? (SELECT ALL THAT APPLY)      CHECK CASHING      SELLING OR REDEEMING MONEY ORDERS SELLING OR REDEEMING TRAVELERS CHECKS      PREPAID ACCESS CARDS      EXCHANGING FOREIGN CURRENCY      VIRTUAL CURRENCY      MONEY TRANSMISSION      INTERNET GAMBLING					
DOES THE BUSINESS HAVE ANY NON-US BASED LOCATIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO ANY OF THE BUSINESS OWNERS SERVE OR HAVE THEY PREVIOUSLY SERVED IN A HIGH POSITION FOR A FOREIGN GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		IS THIS RELATIONSHIP BEING ESTABLISHED ON BEHALF OF OR FOR THE USE OF A FOREIGN EMBASSY/CONSULATE? <input type="checkbox"/> YES <input type="checkbox"/> NO	
DOES THE BUSINESS CURRENTLY OWN OR OPERATE AN ATM AT ITS LOCATION(S)? <input type="checkbox"/> YES <input type="checkbox"/> NO					

### Business Owner Information – Attach additional sheet if more than four.

NAME		SOCIAL SECURITY NUMBER		OWNERSHIP %	DATE OF BIRTH	HOME PHONE NUMBER	US CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO
STREET ADDRESS		CITY	COUNTY	STATE	ZIP CODE		
BUSINESS TITLE		YEARS WITH COMPANY		NET WORTH EXCLUDING VALUE OF COMPANY		ANNUAL INCOME	
DRIVER'S LICENSE NUMBER		STATE OF ISSUANCE		DATE OF ISSUANCE		DATE OF EXPIRATION	
DO YOU HAVE AN ADDRESS IN A FOREIGN COUNTRY? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU CURRENTLY HOLD OR HAVE YOU PREVIOUSLY HELD A POSITION AS A SENIOR POLITICAL OFFICIAL IN ANY FORM OF FOREIGN GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU HAVE A FAMILY MEMBER OR CLOSE ASSOCIATE WHO CURRENTLY OR HAS FORMERLY SERVED IN A HIGH POSITION AS A SENIOR POLITICAL OFFICIAL IN ANY FORM OF FOREIGN GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
NAME		SOCIAL SECURITY NUMBER		OWNERSHIP %	DATE OF BIRTH	HOME PHONE NUMBER	US CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO
STREET ADDRESS		CITY	COUNTY	STATE	ZIP CODE		
BUSINESS TITLE		YEARS WITH COMPANY		NET WORTH EXCLUDING VALUE OF COMPANY		ANNUAL INCOME	
DRIVER'S LICENSE NUMBER		STATE OF ISSUANCE		DATE OF ISSUANCE		DATE OF EXPIRATION	
DO YOU HAVE AN ADDRESS IN A FOREIGN COUNTRY? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU CURRENTLY HOLD OR HAVE YOU PREVIOUSLY HELD A POSITION AS A SENIOR POLITICAL OFFICIAL IN ANY FORM OF FOREIGN GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU HAVE A FAMILY MEMBER OR CLOSE ASSOCIATE WHO CURRENTLY OR HAS FORMERLY SERVED IN A HIGH POSITION AS A SENIOR POLITICAL OFFICIAL IN ANY FORM OF FOREIGN GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
NAME		SOCIAL SECURITY NUMBER		OWNERSHIP %	DATE OF BIRTH	HOME PHONE NUMBER	US CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO
STREET ADDRESS		CITY	COUNTY	STATE	ZIP CODE		
BUSINESS TITLE		YEARS WITH COMPANY		NET WORTH EXCLUDING VALUE OF COMPANY		ANNUAL INCOME	
DRIVER'S LICENSE NUMBER		STATE OF ISSUANCE		DATE OF ISSUANCE		DATE OF EXPIRATION	
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NAME		SOCIAL SECURITY NUMBER		OWNERSHIP %	DATE OF BIRTH	HOME PHONE NUMBER	US CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO
STREET ADDRESS		CITY	COUNTY	STATE	ZIP CODE		
BUSINESS TITLE		YEARS WITH COMPANY		NET WORTH EXCLUDING VALUE OF COMPANY		ANNUAL INCOME	
DRIVER'S LICENSE NUMBER		STATE OF ISSUANCE		DATE OF ISSUANCE		DATE OF EXPIRATION	
DO YOU HAVE AN ADDRESS IN A FOREIGN COUNTRY? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU CURRENTLY HOLD OR HAVE YOU PREVIOUSLY HELD A POSITION AS A SENIOR POLITICAL OFFICIAL IN ANY FORM OF FOREIGN GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU HAVE A FAMILY MEMBER OR CLOSE ASSOCIATE WHO CURRENTLY OR HAS FORMERLY SERVED IN A HIGH POSITION AS A SENIOR POLITICAL OFFICIAL IN ANY FORM OF FOREIGN GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO			

**Co-Applicant Profile – Is this a joint application?    Yes    No    - If Yes complete this section.**

CO-APPLICANT/CO-BORROWER LEGAL NAME				TAX ID/SSN#	
STREET ADDRESS		CITY	COUNTY	STATE	ZIP CODE
MAIL ADDRESS		CITY	COUNTY	STATE	ZIP CODE
PHONE NUMBER	FAX NUMBER	CELL PHONE NUMBER	E-MAIL ADDRESS		
BUSINESS STRUCTURE PROPRIETORSHIP      PARTNERSHIP      CORPORATION      LLC      OTHER			DOB / DATE EST		ANNUAL INCOME/GROSS ANNUAL SALES
I (we) intend to apply for joint credit.					

**Bank References**

BANK NAME	BRANCH	ACCOUNT NUMBER	CONTACT PERSON	12 MONTH AVG BALANCE

**Business Credit / Trade Reference**

NAME & ADDRESS OF CREDITOR	PHONE NUMBER	ACCOUNT NUMBER	HIGHEST BALANCE	CURRENT BALANCE	MONTHLY PAYMENT

**Lease Request**

AMOUNT \$	# OF MONTHS	RATE FACTOR	PURCHASE OPTION \$1.00 Buyout      % Residual      Fair Market Value			ESTIMATED PAYMENT \$
EQUIPMENT TO BE LEASED (MAKE, MODEL, SERIAL #, NEW OR USED)						
STREET ADDRESS EQUIPMENT TO BE LOCATED		COUNTY	___ Inside City Limits      ___ Outside City Limits			

**Vendor Information**

NAME	CONTACT PERSON	PHONE NUMBER	FAX NUMBER
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**Declaration and Authorization – The following information must be provided by individual with significant responsibility for managing the legal entity applying for credit.**

On behalf of the above-named business, I apply to First-Citizens Bank & Trust Company for the credit described above. I certify that the information provided herein is, to the best of my knowledge, true, complete and correct. I understand that the information will be used by the Bank to determine credit worthiness. I authorize the Bank to make credit inquiries in connection with this credit application and report the Business' credit experience to credit bureaus and other persons and/or entities. I also authorize all such persons or entities the Bank contacts to respond completely to such inquiries. Patriot Act Notice: 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 person who opens an account. When you open an account, we will ask for your name, address, date of birth, drivers' license number and other information that will allow us to identify you. We may also ask you to provide copies of one or more of your identifying documents. We thank you for your understanding and for joining us in securing a safer tomorrow.

Signature	Business Title (e.g. Vice President, CEO, etc.)	Date
Printed Name	Address	Country
Date of Birth	US Persons: Social Security Number	
Non-US Persons: Passport Number	Country of Issuance	Expiration Date