



*Please Fill out the Accompanying Application for Finance Options.*

*You can fill out the application directly on their website @*

*<https://www.graybar.com/services/financing/business-application>*

*You can email your application to: [graybarfinancial@graybar.com](mailto:graybarfinancial@graybar.com)*

*Mail in your application to: Graybar Financial*

*11885 Lackland Road*

*St. Louis, MO 63146*

*Or Fax it to: 800-543-0274*

*Any questions? Please call Graybar at 800-241-7408*

*Or Inline Electrical Resources at 602-275-5245*

<b>BUSINESS INFORMATION</b>	Full Legal Name <b>Company Name</b>		Tax Identification Number		
	Billing Street Address <b>Address</b>		Phone Number		
	City/County/State/Zip <b>City, State and Zip Code</b>		Fax Number		
	Equipment Location (If different from above) Street Address/City/County/State/Zip				<input type="checkbox"/> Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation State of Inc. _____ Date of Inc. _____ <input type="checkbox"/> Limited Liability
	Contact		Phone Number		
	Nature of Business		No. of Employee's		
	Principal/Partner/Officer		Social Security Number		
	Home Street Address				
City/State/Zip					
<b>VENDOR INFORMATION</b>	Vendor Name <b>Name</b>		Phone <b>Telephone Number</b>		Fax
	Address <b>Address</b>				Website
	City, St-ZIP <b>City, State and Zip</b>				
	Contact <b>Sales Person</b>		Vendor E-Mail Address		
<b>EQUIPMENT INFORMATION</b>	Lease Term (Months) <b>60 Months</b>		Estimated Equipment Price		<b>\$0.00</b>
	Payment Quoted		Rebate		<b>\$0.00</b>
	Total Price (excludes applicable taxes)				<b>\$0.00</b>
	Equipment Description				
<b>BANK REFERENCE</b>	Bank Reference Name		Account/Loan Officer		Phone Number
	Address City,		Account Number		Fax Number
<b>BUSINESS PURPOSE</b>	You, the applicant, certify to us that you are applying for credit for a business purpose, and not for personal, family, or household purposes.				
<b>AUTHORIZATION</b>	By signing below, you certify that all statements contained in this application are true and correct. You authorize Graybar Financial Services or its assignee to obtain further information regarding your personal or business standing, which credit standing, which may include obtaining personal credit bureau reports from a credit reporting agency.				
	X _____		_____		_____
	Signature		Print Name		Date

**DISCLOSURE OF RIGHT TO REQUEST SPECIFIC REASONS FOR CREDIT DENIAL GIVEN AT TIME OF APPLICATION (BUSINESS CREDIT)**

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Credit Disclosure Administrator, Graybar Financial Services, 11885 Lackland Road, St. Louis, MO 63146, 800-241-7408 within 60 days from the date you are notified of the credit decision. We will send you a written statement of reasons for the denial of credit within 30 days of receiving your request for the statement.

**Notice:** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the credit is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

This page contains a notice required under the Equal Credit Opportunity Act. The Lessee is entitled to receive and retain a copy of this notice. When an application for business credit is made solely by telephone, compliance with the notice requirements may be satisfied by oral disclosure of the applicant's right to a statement of the reasons for a denial of credit.