



Newport Leasing Group

EQUIPMENT RENTAL APPLICATION

Application Information

Full name:	_____	Date:	_____
	<i>Last First M.I.</i>		
Address:	_____	Phone:	_____
	<i>Street address Apt/Unit #</i>		
	_____	Email:	_____
	<i>City State Zip Code</i>		

Company Name: _____

How Long have you been in business? _____

Active MC Number _____

Business References

Please List 3 Business References

Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____

Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____

Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to approval for the rental of equipment with Newport Leasing Group, I understand that false or misleading information in my application may result in immediate termination of my rental agreement.

Signature: _____

Date: _____