



REQUIREMENT FOR CORPORATE LEASE

- ❖ Your formal application on your letter head.
- ❖ Copies of incorporation documents.
- ❖ 2 passport photographs of your MD/CEO
- ❖ Board resolution to borrow.
- ❖ Corporate and Management profile.
- ❖ Copies of recent utility bills (3months).
- ❖ Bank statement (6months).
- ❖ Copy of valid National I.D card / Drivers licence / International passport of your MD.
- ❖ Evidence of past jobs done.
- ❖ Cash flow projection for the proposed tenor of the lease.
- ❖ Audited Account /Management Account (where applicable).
- ❖ #25,000-cheque in favour of First Choice Leasing Ltd for search fee.



LEASE APPLICATION FORM

CORPORATE LEASE

LEASEE'S PROFILE

NAME: DATE OF INCORPORATION:
.....

BUSINESS OFFICE ADDRESS: DATE OF COMMENCEMENT OF BIZ:
.....

..... PLACE OF INCOPORATION
.....

TELEPHONE: EMAIL:
.....

WEBSITE:
.....



DETAILS OF SUBSCRIBERS/SHAREHOLDERS/SIGNATORIES

NAME SHAREHOLDING	ADDRESS	₱ SHAREHOLDING	%
----------------------	---------	----------------	---

1. _____

2. _____

3. _____

4. _____

AUTHORIZED SHARE CAPITAL _____ PAID - UP CAPITAL

MANAGEMENT

BOARD OF DIRECTORS/PARTNERS

NAME	ADDRESS	PHONE NO.
------	---------	-----------

1. _____
2. _____
3. _____

STAFF STRENGTH

.....

CORPORATE STATUS

Sole Proprietorship Partnership Enterprises Limited Liability
Company

MAJOR CUSTOMERS

NAME NO)	LOCATION	CONTACT PERSON (NAME & PHONE
1. _____ _____	_____	_____
2. _____ _____	_____	_____
3. _____ _____	_____	_____
4. _____ _____	_____	_____
5. _____ _____	_____	_____

PRINCIPAL BANKERS

BANK NAME	BRANCH ADDRESS	ACCT. NUMBER
1. _____ _____	_____	_____
2. _____ _____	_____	_____
3. _____ _____	_____	_____
4. _____ _____	_____	_____

DESIRED EQUIPMENT

S/N	ITEM DESCRIPTION	UNIT PRICE	AMOUNT

SUGGESTED TENOR (tick the one applicable)

24 Months
 36 Months
 48 Months
 60 Months

EXISTING LOANS/OBLIGATIONS TO OTHER FINANCIAL INSTITUTION/THIRD PARTIES

INSTITUTION TYPE TOTAL AMOUNT START DATE END DATE EXPOSURE

1. _____
2. _____
3. _____

CERTIFICATION

I hereby certify and undertake that the information given above is true to the best of my knowledge.

For:

Name:

MD/CHIEF EXECUTIVE OFFICER

DATE.....