



GOVERNMENTAL LEASE APPLICATION

Vendor: _____ Phone: _____ Fax: _____

Address (Street, City, State & Zip): _____

Lease Information

Amount Financed \$ _____ Anticipated Delivery Date: _____

Company Information

Entity Name: _____

Please list name exactly as it appears on the official stamp of the governmental entity.

Physical Address: _____

Address (Street, City, State & Zip): _____

Phone: _____ Fax: _____ Date Fiscal Year Ends: _____

Primary Signer

First Name: _____ Last Name: _____

Contact Title: _____ Tax ID: _____

Billing Address: _____

Address (Street, City, State & Zip): _____

Authorized Signers for Agreements

Name: _____ Title: _____

Secondary Signer

Name: _____ Title: _____

Appropriation Signer

Name: _____ Title: _____

Attestor

Insurance Information

Insurance Agent Name: _____

Company: _____

Billing Address: _____

Address (Street, City, State & Zip): _____

Phone: _____ Insurance Policy Number: _____

Other Information

Government Body: _____

Insured? Yes No Self-Insured? Yes No Maintenance Yes No Self-Maintenance Yes No



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Lease Information

Vendor: _____ Phone: _____ Fax: _____

Address (Street, City, State & Zip): _____

Documentation Requirements

In addition to the attached Governmental Lease Application, we require the following documentation:

- Municipal Resolution (Diversified Lenders will provide the proper form)
- Two most recent financial audits
- For transactions over \$300,000, we may require an *Attorney Opinion Letter*

Form Index

Need help with some of the information required on the form?
Use this index to help you understand more about the information we are requesting.

- Anticipated Delivery Date** Enter the expected date the product will be delivered/installed.
- Business Name** Enter the legal name of the business. (*E.g. this is City of..., Country of...every school ISD, etc.*)
- Date Fiscal Year Ends** Enter the date your Fiscal Year ends. (E.g. September 30)
- Primary Signer** Enter the primary signer's information. This is the individual with the authority to bind the local government to this agreement. (*E.g. the mayor, county judge, school board president, etc.*)
- Secondary Signer** Enter the name of the secondary signer. The Secondary Signer is usually the secretary of the city or like person for a county or school district. The person is attesting the primary signer's signature.
- Appropriation Signer** Enter the name of the person that will sign the statement of appropriation for the entity. (*E.g. the city secretary, county clerk, board secretary*)
- Attestor** Enter the name of the person that will attest to the legality of the individuals signing the lease documents. (*E.g. the city secretary, county clerk, board secretary*)
- Insurance Agent Information** Enter the information for the entity's insurance agent. We need the property/contents insurance policy number. This is the policy that will cover the product being financed in case of a loss.
- Governing Body** Governing body applies to an entity such as a city council, school board, commissioner's court, etc.
- Insured** Enter the appropriate response to indicate if the entity is insured or is not insured by an insurance company.
- Self Insured** Enter the appropriate response to indicate if the entity is self-insured or is not self-insured.
- Maintenance** Enter the appropriate response to indicate if the entity has the equipment/product covered under maintenance or will not have maintenance coverage.
- Self-Maintenance** Enter the appropriate response to indicate if the entity has the equipment/product covered under self-maintenance or will not have self-maintenance coverage.