



**Thern**  
Stage Equipment

# Municipal Application

## Municipality Information

Legal Name of Lessee

Address

City

State

Zip

## Municipality Contact Information

Contact Person 1

Title

Phone

Fax

Email

Contact Person 2

Title

Phone

Fax

Email

## Equipment & Finance Information

Total Cost of Equipment

Advance Payment

Amount to Finance

Term (Years)

Delivery Date

Payment

Payment Schedule

Monthly  Annual  Semi-Annual

What fund will the payments be made from :

General

Special

Other (

)

Have you ever been in Default or Non-Appropriated on a Municipal Lease :

Yes

No

Is your organization Bank Qualified?

Yes

No

## Vendor Information

Completed By

Title

Vendor Name

Vendor Contact

Vendor Email

Vendor Phone

Vendor Fax

Equipment Cost

Equipment Description:

## Submit Completed Credit Application to First Western Equipment Financing



**First Western  
Equipment Finance**  
Financing Made Simple.

[www.firstwesternef.com](http://www.firstwesternef.com)

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