



# OMEGA CAPITAL PARTNERS

LLC

## INFORMATION UPDATE SHEET

For your lease option on acquiring equipment, the information below is all we need for your next purchase. Please fax your application to 512-292-6619, Attn: Mark Johnston or email to: mark@omegacap.net. Thank you!!

### COMPANY INFORMATION

Company Name \_\_\_\_\_ Years in Business \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fed Tax ID # \_\_\_\_\_  
 Business Address \_\_\_\_\_

COMPANY STRUCTURE Corporation [ ] Sole Proprietorship [ ] Partnership [ ] LLC [ ]

### BANK INFORMATION

Bank Name/Contact \_\_\_\_\_  
 Account Numbers \_\_\_\_\_  
 Telephone \_\_\_\_\_

### PERSONAL INFORMATION

Name (Principal) \_\_\_\_\_ SSN \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 Telephone \_\_\_\_\_

OMEGA CAPITAL PARTNERS, LLC provides customers nationwide with:

- Easy payment terms
- 24 hour approval turn around
- Operating and capital lease structures
- Tough Credits Accepted
- Start Up Business Accepted

### DECLARATION

Applicant warrants that all credit and financial information submitted to lessor herewith or at any time is true and correct, and authorizes Omega Capital Partners, LLC to investigate applicants credit worthiness as may needed. The undersigned authorizes all banking institutions, credit reporting agencies and its agents to release all necessary information via telephone, mail or facsimile as requested, for the purpose of securing a lease.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

If you are not acquiring equipment at this time please keep this information on file for future acquisitions.