



VENDOR PROFILE AND APPLICATION

Marlin Leasing Corporation dba PEAC Solutions
300 Fellowship Road, Mt. Laurel, NJ 08054

p: 888.479.9111 f: 888.479.1100
PEACsolutions.com

Sales Rep: _____

VENDOR INFORMATION

Full Business Name:	Contact:
DBA:	Email:
Address:	City/State/Zip:
Phone:	Company EIN:
Web Address:	
Type of Business: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	Year Business Began:
Annual Sales Volume:	Monthly Lease Volume:
CEO/Owner:	Social Security #:
Home Address:	City/State/Zip:

EQUIPMENT INFORMATION

Types of Equipment Sold:	
Average Equipment Cost:	Target Market:

REFERENCES

Equipment Supplier:	Contact:
Phone:	Account #:
Equipment Supplier:	Contact:
Phone:	Account #:

ACH QUICK FUND/BANKING INFORMATION

NOTE: PLEASE ATTACH A VOIDED CHECK TO APPLICATION.

PEAC Solutions gives you fast access to your cash through our ACH Quick Fund Program. Your funds will be wired to you through your bank's participating Automated Clearing House System. A notice will be faxed to you with the transaction information and amount.

Bank Name:	Contact:
Account Name:	Account #:
Bank ABA Number:	Phone:

OTHER INFORMATION

Are you using PEAC Portal, our Online Lease Transaction Processing Center?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How many sales reps do you have?	Are there branch offices <input type="checkbox"/> Yes <input type="checkbox"/> No?

AUTHORIZATION

The person(s) supplying the above information certifies to Marlin Leasing Corporation dba PEAC Solutions that it is true and correct. The Officers/ Owners recognize that their individual credit histories may be a factor in the evaluation of the applicant and, thus, authorize PEAC or its designee to investigate their personal credit status. This includes obtaining and using their consumer credit reports from time in the evaluation process.

Print Name of Corporate Officer X _____

Signature of Corporation Officer X _____

Date: _____