



**ERVIN LEASING SIMPLE FUNDING PROGRAM FOR MOHAWK LIFT TRANSACTIONS UNDER \$250,000**  
 Please fully complete the following information and fax to Leighanne at Ervin Leasing (800) 968-2808

Legal Name of Lessee _____		
Address: _____		
City: _____	State: _____	Zip: _____
Contact Person: _____		Title _____
Email Address: _____		
Phone: _____		Fax: _____
Alternative Contact Person: _____		
<b>Year Municipal Entity was Established:</b> _____		<b>Do you Self-Insure for Property &amp; Liability Insurance?</b>
Total Cost of Equip.: _____	Term Requested (months):	24 _____ 36 _____ 48 _____ 60 _____
Down Payment: _____	Source of Down Pmt: _____	
Trade In: _____	Payment Amount: _____	
Other: _____	Payment Due: _____	Advance: _____ Arrears: _____
Amount to Finance: _____	Payments: Monthly _____ Semi-Annual _____ Annual _____ Quarterly _____	
Equipment Description - Including make and model (please attach brochure if available): _____		
New Equipment: Yes _____ No _____	If used, please list age of equipment or manufacture date: _____	
Replacement: Yes _____ No _____	Age of Current Equipment: _____	Year Purchased: _____
If not a replacement, why is the equipment needed? _____		
Buyout Included: Yes _____ No _____	Amount of Buyout being financed: _____	
Describe the essential use of the equipment purchased: _____		
Approximate Delivery Date: _____		
Physical location of the equipment after delivery: _____		
<b>Has the Lessee ever defaulted or non-appropriated on a lease or bond? Yes _____ No _____</b>		
Will the Lessee's total Tax-Exempt Debt be greater than \$10,000,000.00 in this calendar year? Yes _____ No _____		
What fund will the rental payment be made from? General _____ Special (Specify) _____		
<b>For transactions between \$100,000 and \$250,000, Please attach one year of the most recently Audited Financial Statements</b>		
<b>Please Complete the Section Below for Transactions up to \$100,000</b>		
<b>Combined Total Funds of Lessee</b>	<b>Current Year</b>	<b>Prior Year</b>
Total Revenue: _____	_____	_____
Total Expenditures: _____	_____	_____
Net Income: _____	_____	_____
Fund Equity (per Balance Sheet): _____	_____	_____
Mohawk Dealer: _____	Email: _____	
Sales Person: _____	Salesrep Phone: _____	
Completed By: _____	Phone: _____	
Typed Name & Title _____		

**ERVIN LEASING**  
 3893 Research Park Drive, Ann Arbor, MI 48108 Phone: 800-748-0015 Fax: 800-968-2808