Municipal Application

SIMPLE FUNDING PROGRAM FOR TRANSACTIONS UNDER \$250,000

Please fully complete the following information and fax to 1st Priority at (330) 475-7997

Logal Name Of Logacy			
Legal Name Of Lessee:			
Address:			
City: County:	State: Zip:		
Contact Person:	Title:		
Email Address:	Website: www.		
Phone: () -	Fax: () -		
Alternate Contact Person:			
Year Municipal Entity Was Established:	Do You Self-Insure For Property & Liability Insurance?	☐ Yes ☐ No	
Total Cost Of Equipment: \$	Terms Requested (Years)	Terms Requested (Years)	
Down Payment*: \$	Source Of Down Pmt:	Source Of Down Pmt:	
Trade In: \$	de In: \$ Payment Amount: \$		
Other: \$	Payment Due:	e □ Arrears	
Amount To Finance: \$	Payments: Monthly Semi-Annual Annu	al 🗌 Quarterly	
Equipment Description-Including Make And Model (please attach brochure if available):			
Equipment Description-including wake And woder (please attach brochure if available):			
New Equipment:			
Refurbished:			
	e Of Current Equipment: Year Purchased:		
If Not A Replacement, Why Is The Equipment N	leeded?		
Buyout Included: Yes No Amount Of Buyout Being Financed:			
Soft Costs Financed:			
If The Equipment Is A Building, Do You Own The Land?			
Describe The Essential Use Of The Equipment Purchased:			
Describe The Essential Ose of the Equipment Furchased.			
Annua viim ata Dalimana Data			
Approximate Delivery Date:			
Physical Location Of Equipment After Delivery:			
Has The Lessee Ever Defaulted Or Non-Appropriated On A Lease Or Bond?			
Will The Lessee Issue More Than \$10,000,000 In Tax-Exempt Debt In This Calendar Year?			
What Fund Will The Remaining Lease Payments	s Be Made From?		
Will The Down Payment Be Made At Or Before D	Delivery:		
Transactions Between \$100,000 To	\$250,000 Or Above \$50,000 & Greater Than 5 \	ears	
Please Attach 1 Year Of The Mos	st Recent Financial Statements (Audits Preferred	<u> </u>	
Please Complete The Secti	ion Below For Transactions Up To \$100,000		
Combined Total Funds Of Lease Curre	rent Year (Actual YTD) Prior Year (Actual N	ot Budget)	
Total Revenue:			
Total Expenditures:			
Net Income:			
Fund Equity: (Per Balance Sheet)			
Failure to Consummate this transaction once credit is approval is gran	anted and the lease documents are drafted and delivered to the Lessee will re f the transaction is funded by Baystone Financial Group as agreed. *Proof of		
required prior to any disbursements being made to the vendor, unless otherwise negotiated			

Typed Name & Title:

Completed By (Signature):