



VENDOR PROFILE

1770 S. Randall Road, #A-145
Geneva, IL 60134

Phone: 800-747-7304
Fax: 800-281-3959

VENDOR INFORMATION – Provide the following information regarding your Company (PLEASE PRINT)

Business Name		Federal Identification No.	
Street Address		State Resale Tax No.	
City	State	Zip	Website:
Telephone No: ()	Fax No: ()	Email:	
Type of Business (check one) <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation (Incorporated in State of _____)		Age of This Business ____ Years ____ Months	Do you own or rent your business office? ____ Own ____ Rent
Principal Name		Title: Home Phone ()	
Social Security No:		Home Address:	
Principal Name		Title: Home Phone ()	
Social Security No:		Home Address:	

EQUIPMENT INFORMATION: What type of equipment do you sell / install?

IF SECURITY EQUIPMENT, PLEASE ANSWER THE FOLLOWING QUESTIONS:

What percentage of your business is: Residential _____% Commercial _____%

Approximately how many monitored accounts do you have? Under 250 250-750 750-1500 1500-2500 Over 2500

What types of commercial equipment do you install? Access Control Cameras/DVRs CCTV Burglary Fire Systems
 Integrated Systems Telephone Systems Other: _____

What Central Station(s) do you use:

BANK REFERENCES – Provide the following information regarding the bank(s) you do business with:

Name of Bank	City/State	Telephone No. ()	Account No.	Contact Officer
Name of Bank	City/State	Telephone No. ()	Account No.	Contact Officer

**TRADE REFERENCES – Provide the following information regarding the companies that supply products and services to you.
(Include any leasing companies that you have done business with in the past.)**

Name of Company	City/State	Telephone No. ()	Account No.	Contact
Name of Company	City/State	Telephone No. ()	Account No.	Contact
Name of Company	City/State	Telephone No. ()	Account No.	Contact

AUTHORIZATION

I hereby authorize Leasing Company, or any credit bureau or other investigative agency employed by Leasing Company to investigate the references herein listed or statements or other data obtained from me or from any other person pertaining to the above named applicant's credit and financial responsibility.

Name: _____ Title: _____

Signature _____ Date: _____