

# Vendor Participation

EQUIPMENT LEASE AND FINANCING

The team at Univest Capital partners with vendors across the nation to capitalize on all the opportunities we can provide. We enable our vendors to maximize closed business opportunities by utilizing our financial products and services:

- Designing and implementing custom programs
- Training client sales representatives
- Participating in joint sales calls
- Completing all finance documents
- Tracking applications
- Working with clients to make sure the program is successful

Developing direct, long-term relationships with quality equipment and software vendors is essential. With an over-arching goal of boosting total sales and gross profit per sale, we can succeed in business together.

For more information or to apply, call 866.604.8160 or fax the Short Form Application to 866.604.8161.



Solutions for all of your equipment needs.



Univest Capital, Inc. is a subsidiary of Univest Bank and Trust Co.

# Leasing Program

Univest Capital understands how imperative equipment is to most businesses. Leasing is a great solution and can assist you in meeting business growth goals while conserving working capital. With the ability to finance equipment across the nation for transactions ranging from \$5,000 to \$250,000, we can help you meet your goals now and in the future.

### Benefits of our small-ticket program:

- Competitive rates
- 100% financing
  - Conserves capital
  - Conserves credit
  - Improves cash flow
  - Provides tax benefits
- Quick credit decisions within a few hours of completed application
- Fast and easy access to capital with our "Application Only" program
- Variety of programs available - copiers, telephone systems, machine tools, medical equipment
- Lease amounts start at \$5,000
- Flexible financing terms



## SHORT FORM APPLICATION

### Business Information

Business Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Cell Phone Number: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

- Corporation     Partnership  
 LLC             Proprietorship

Years in Business: \_\_\_\_\_

Equipment Description (if you have a sales quote or invoice please fax with application): \_\_\_\_\_  
\_\_\_\_\_

Supplier: \_\_\_\_\_

Supplier Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Supplier Phone: \_\_\_\_\_

Supplier Fax: \_\_\_\_\_

Supplier Website Address: \_\_\_\_\_

Sales Rep: \_\_\_\_\_

- Term:  
 12 Months     24 Months     36 Months  
 48 Months     60 Months

Cost: \$ \_\_\_\_\_

### Principal Information

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_

### Trade Resources

Trade Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Trade Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Contact: \_\_\_\_\_

### Bank Reference

Bank Name: \_\_\_\_\_  
 Account #: \_\_\_\_\_  
 Branch Location: \_\_\_\_\_

### Sign

Applicant hereby authorizes the release of credit information  
 Signature \_\_\_\_\_  
 Print Name \_\_\_\_\_

The signer(s) acknowledge(s) and understands that our company is relying on the information provided herein to decide to grant or continue credit.

**Fax completed application to 866.604.8161**