



2105 Elm Hill Pike  
Nashville, TN 37210  
(800) 724-6026  
(877) 331-3665 Fax

**Date:** 1/4/2013

<b>To:</b>	Diana Siggler	<b>Presented By:</b>	Robert Campbell
	Center Realty Associates, LLC		Building Technology Services, Inc.
	2201 NW Corporate Blvd., Suite 203		13833 Wellington Trace, E4-157
	Boca Raton FL 33431		Wellington FL 33414
			561-712-1126

**Thank you for the opportunity to provide the following financing proposal for your commercial HVAC needs.**

**This proposal will provide you with monthly payment estimates and other pertinent leasing information.**

**Total Investment (Less Taxes): \$106,250.00**

**24 Month Estimated Monthly Investment: \$4866.25**

**36 Month Estimated Monthly Investment: \$3391.50**

**48 Month Estimated Monthly Investment: \$2644.56**

**60 Month Estimated Monthly Investment: \$2167.50**

**72 Month Estimated Monthly Investment: \$1857.25**

**84 Month Estimated Monthly Investment: \$1651.12**

**\*\*Important Lease Information\*\***

The payments shown above are based upon the Like-Term U.S. Treasury Notes and are subject to fluctuation. Monthly payments are fixed at final scheduling. No advance payments are required in most cases. All transactions will require a one-time documentation fee which would be summarized in the customer's lease documents. Rates and Terms are subject to credit approval. Lease rates are subject to change without notice, and this quote is only an estimate. It does not commit the leasing company to a specific payment term or amount. Monthly payment estimates do not include taxes. Taxes will be billed on each payment. Upon expiration of the lease, the lessee will purchase the equipment from the leasing company for one dollar (\$1.00).

**We look forward to providing you both the comfort and financial solutions you need. If you have questions or would like further information, please contact:**

Trane Leasing Services  
1-800-724-6026

**When you are ready to proceed, just fill out the credit application and fax it to Trane Leasing Services (Fax 1-877-331-3665) - we'll do the rest! Call 1-800-724-6026 for leasing assistance.**

**Sincerely,**

Robert Campbell



Vendor/Contractor: \_\_\_\_\_ Telephone: \_\_\_\_\_ Contact: \_\_\_\_\_

LEGAL BUSINESS NAME: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Type of Business: C-Corp  S-Corp  Sole Proprietor  Partnership  Ltd Partnership  LLC

Business Address \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

DBA: (doing business as) \_\_\_\_\_ Business Description: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_ Years in business: (Current Ownership) \_\_\_\_\_

Equipment Location Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_  
(If different from business address)

**PERSONAL INFO ON OFFICERS, PARTNERS AND GUARANTORS**

Officer 1: \_\_\_\_\_ Title: \_\_\_\_\_ Owner %: \_\_\_\_\_

SSN: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Tel: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Officer 2: \_\_\_\_\_ Title: \_\_\_\_\_ Owner %: \_\_\_\_\_

SSN: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Tel: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Officer 3: \_\_\_\_\_ Title: \_\_\_\_\_ Owner %: \_\_\_\_\_

SSN: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Tel: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

**BANK AND PRIOR LEASE REFERENCES**

Bank Name: \_\_\_\_\_ A/C # \_\_\_\_\_ Year Account Opened: \_\_\_\_\_

Type of Account: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Bank Name: \_\_\_\_\_ A/C # \_\_\_\_\_ Year Account Opened: \_\_\_\_\_

Type of Account: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Lease History 1: \_\_\_\_\_ A/C #: \_\_\_\_\_ Tel: \_\_\_\_\_

Lease History 2: \_\_\_\_\_ A/C #: \_\_\_\_\_ Tel: \_\_\_\_\_

**LANDLORD OR MORTGAGE INFORMATION**

Landlord: \_\_\_\_\_ Contact: \_\_\_\_\_ Tel: \_\_\_\_\_

Mortgage Holder: \_\_\_\_\_ Contact: \_\_\_\_\_ Tel: \_\_\_\_\_

Account Number: \_\_\_\_\_ Year Mortgage Opened: \_\_\_\_\_

**EQUIPMENT DETAILS**

Cost: \$ \_\_\_\_\_ (Do not include sales tax). Please provide a copy of the equipment/work proposal

**Term Requested**

2 years  3 years  4 years  5 years  6 years  7 years\*

\*7 years Available on Transactions >\$100,000.00

*I certify the information provided herein is correct, that I am empowered to authorize Trane Leasing Services and/or assigns to make whatever inquiries about us deemed necessary to evaluate our credit application, including contacting banks, trade references and reporting agencies, and that individuals herein named are aware of this request. Should application be declined, I understand that I am entitled to receive written confirmation of the reason why within 30 days of the receipt of my written request.*

Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Owner: \_\_\_\_\_ Date: \_\_\_\_\_