ORBIT LEASING THIRD-PARTY AUTHORIZATION FORM

I authorize Orbit Leasing to speak to, share my account information with, and take payment arrangements and/or payments (using either my or their bank account or debit/credit information) from the following person(s):

Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
Lessee:	Date:
Co-Lessee:	Date: