



Retail Credit Application

Dealer Name:	City:	Sales Rep:
Transaction		
Equipment Description (Quantity, Year, Make, Model, Serial #, Price): <i>Attach dealer quote or invoice if available</i>	Total Equipment Price:	
	Tax:	
	Less Down/Trade:	
	Doc Fees:	
Term: <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> Other	Product: <input type="checkbox"/> Loan <input type="checkbox"/> Lease	Finance Amount:

Customer		
Company Legal Name:	Phone Number:	
Tradestyle/DBA:	Federal Tax ID:	
Business Address:	City/State/Zip:	
Equipment Address:	City/State/Zip:	
Type of Business: <input type="checkbox"/> S-Corp <input type="checkbox"/> Non-Profit <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Government <input type="checkbox"/> LLC <input type="checkbox"/> LLP		
Time in business if less than 2 years, please explain industry experience	State of Formation:	
	Tax Exempt: <input type="radio"/> Y <input type="radio"/> N	
	Contact:	
	Email:	
	Phone:	
Affiliate companies: <input type="radio"/> Y <input type="radio"/> N (If yes, please include company name, Tax ID, address, business type, relationship to applicant)		

Guarantor		
Name:	DOB:	SSN:
Phone:	% Owner:	<input type="checkbox"/> Director <input type="checkbox"/> Member <input type="checkbox"/> Officer <input type="checkbox"/> Shareholder
Home Address:	City/State/Zip:	
Name:	DOB:	SSN:
Phone:	% Owner:	<input type="checkbox"/> Director <input type="checkbox"/> Member <input type="checkbox"/> Officer <input type="checkbox"/> Shareholder
Home Address:	City/State/Zip:	

Business Overview		
What Type of work, describe		
<input type="checkbox"/> Rental House / Wholesaler	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Logging <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Mining <input type="checkbox"/> Recycling/Refuse
<input type="checkbox"/> Industrial	<input type="checkbox"/> Construction	
Is your business seasonal? <input type="radio"/> Y <input type="radio"/> N If yes, months shut down:		
Average monthly revenue:	Average monthly expenses:	
Annual incomes:	Annual expenses:	
Financing Purpose: <input type="radio"/> Replacement unit <input type="radio"/> Addition to existing fleet		
Equipment owned/leased: Use second page if necessary		

Lender	Account # or Serial #	Year/Make/Model	Balance	Monthly Payment

The undersigned understands and agrees that the undersigned is signing this application as an authorized representative of the Customer, as well as in its individual capacity, and certifies to Wells Fargo Bank, N.A., its parent, and affiliates (collectively, "WFBNA") that the information stated in this application is true and correct. The undersigned understand that WFBNA will retain this application whether or not it is approved. WFBNA and/or entities to whom WFBNA refers this application (each a "WFBNA Party") are authorized to check the credit and employment history of the undersigned (including criminal background checks), obtain insurance information, and to answer questions about their credit experience with the undersigned. The undersigned authorize each WFBNA Party to obtain credit bureau reports, credit references, and contact any creditors of the undersigned and authorize any person so contacted to release to such WFBNA Party such information as such WFBNA Party may request. The undersigned further authorize each WFBNA Party to share this application, WFBNA's credit decision, and the undersigned's information, including credit bureau reports and credit references, with potential purchasers or assignees of transactions that result from this application, and the manufacturer and supplier of the subject equipment. **Notice to Applicants and Guarantors:** To help the government fight the funding of terrorism, narcotics trafficking, trans-national organized crime, and money laundering activities, U.S. Federal law requires financial institutions to obtain, verify, and record information that identifies each person (individuals or businesses) who opens an account. What this means for you: When you open an account or add any additional service, we will ask you for your name, address, and taxpayer identification number that will allow us to identify you. We may also ask to see other identifying documents and information relating to beneficial owners and we may verify compliance by you and other beneficial owners with requirements of U.S. Federal laws.

Signature:	Signature:
Print:	Print:
Title:	Title:
Date:	Date: