

DEALER CREDIT APPLICATION

To: U.S. Bank Equipment Finance, a division of U.S. Bank National Association 100 Mill Plain Road, Danbury, CT 06811 Phone: 800-642-9387; Fax: 866-933-4505

COMPANY INFORMATION									
Con	npany Name:	("Applicant")							
Reg	istered DBA:			DBA	DBA Registration State:		ite:		
Federal Tax ID:				State Organization #:					
Company Type: C-Corpor		C-Corporation	Year Established:						
State of Organization or State of Le		State of Legal Resider	egal Residence for Sole Proprietorships:						
Main Location: (Ad		(Address)	.ddress)					(Phone)	
		(City)	(County)	(S	(State) (Zip))	(Fax)	
Insu	ırance Company:			Polic	Policy #:				
Insu	ırance Agent Name:		Agent's Phone #:						
Has	the Applicant ever fil	ed bankruptcy or beer	tcy or been subject to a tax lien? 🔲 Yes 🔲 No. If "yes", please a				please attac	ch explanation.	
Has	the Applicant ever be	een a U.S. Bank custo	omer?: 🗌 Yes 🔲 N	No. If "yes",	pleas	e provide a	account #:		
infor cont App princ App infor App	Finance, a division of U.S. Bank National Association ("Equipment Finance") and its agents (1) to obtain more credit information (including credit reports) about Applicant and its principals and/or co-owners and to make inquiries in connection with this Application; (2) to share credit information with Equipment Finance's affiliates and agents, as well as Applicant's other creditors, bureaus and persons who have or expect to have financial dealings with the Applicant or its principals named herein; and (3) to share collection information with Applicant's other creditors. All the information in this Application is true, complete and correct. Applicant will notify Equipment Finance of any material change in this information and/or the condition of its affairs. The person signing below on behalf of Applicant is authorized to make this Application and to agree to the foregoing on its behalf. Each other individual certifies that the respective information about him/her is true, complete and correct.								
PRINCIPAL(S) Personal Residence Years			ars with	Date of	Social Security				
Name			Address %		Co	ompany	Birth	Number	
1.									
2.									
3.									
4.									
5.									
	Signatures of Each	erson Listed Above Printed Name		Names	es Titles		itles	Dates	
1.									
2.									
3.									
4.									
5									

USA PATRIOT ACT NOTICE

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT:

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. Before you enter a transaction with us, we will ask for your name, address and other information that will allow us to identify you. We may also ask to see other documents that substantiate your identity.

AUTHORIZED SIGNERS

If Equipment Finance, in its sole discretion, approves this credit application, the following information will be required to					
prepare loan documents.					
REQUIRED		(Title)			
REQUIRED	(Name of person who will sign the loan documents)				
REQUIRED		(Title)			
KEQUIKED	(Name of person who will sign each funding request)				
OPTIONAL		(Title)			
OFTIONAL	(Name of additional person who will sign each funding request)				
REQUIRED		(Title)			
KEQUIKED	(Name of person who will sign Secretary's Certificate)				

AFFILIATED COMPANIES

Company Name	City, State	Nature of Affiliation		

CREDIT REFERENCES

1.	(Bank)	(Contact Name)	(Phone)	
	(Address)	(City)	(State)	(Zip)
2.	(Bank or Finance Company)	(Contact Name)	(Phone)	
	(Address)	(City)	(State)	(Zip)
3.	(Bank or Finance Company)	(Contact Name)	(Phone)	
	(Address)	(City)	(State)	(Zip)
4.	(Manufacturer or Trade)	(Contact Name)	(Phone)	
	(Address)	(City)	(State)	(Zip)
5.	(Manufacturer or Trade)	(Contact Name)	(Phone)	
	(Address)	(City)	(State)	(Zip)

BRANCH LOCATIONS

1.	(Address)	(City)	(State)	(Zip)
2.	(Address)	(City)	(State)	(Zip)
3.	(Address)	(City)	(State)	(Zip)
4.	(Address)	(City)	(State)	(Zip)

FINANCIAL INFORMATION

If requested, the three most recent audited or reviewed fiscal year-end financial statements should accompany this application along with the most recent interim financial statement and the corresponding prior year interim financial statement. If statements are compiled, then also submit the most recent two years' tax returns. If requested, Personal Financial Statements for individuals listed in "Principals" section above should be supplied along with the most recent two years' tax returns. If Applicant is a subsidiary of another corporation, the two most recent fiscal year-end financial statements of the parent corporation should also be included.

FINANCING REQUIREMENTS

This application should be accompanied by a detailed description of the financing requirements, including what type(s) of financing will be required and an estimate of the annual financing volume. Detailed information on the number of short-term rental units and inventory stocking requirements are essential to establishing appropriate credit facilities.

HISTORY AND OPERATIONS

Please provide a summary of the history and operations of the company, including a synopsis of management and experience. Please include brands represented by percentage of total sales, franchise territories where applicable, primary industries served, rental fleet utilization, etc.