Financing provided by:

Wells Fargo Equipment Finance – Manufacturer and Dealer Finance 800 Walnut St., Des Moines, IA 50309



To help the government fight the funding of terrorism 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, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Legal Owner/Guarantor Data - Proprietor, Co	rporate Officer, Part	tner, Genera	al Partner (if a	person), LL	C Managir	ng Member (if a pe	erson)
Name			% Con	% Company Ownership		Home Telephone	Date of Birth
Home Address	City	City		County		Zip Code	Social Security Number
Name			% Con	% Company Ownership		Home Telephone	e Date of Birth
Home Address	City		State	County		Zip Code	Social Security Number
Applicant			L	1			
(If a corporation, LLC, LP or other organization, use EXACT registered name.)			Phon	e Number		Fax Number	
Applicant's Name			Contact Pe	erson's Cell	l No.	Contact's Email Address	
Primary Business or Farm Address						County	
Proposed location/address of equipment/property:						County	
General description of Applicant's business:				In Business Since: /			·: /
Sole Proprietorship For-Profit Corporation Non-Profit Corporation Limited Liability Co. Limited Partnership General Partnership Other (List Type)							
Country of Citizenship State of Organization/Registration Federal Tax ID/SSN Number							
Equipment & Usage: (Include trade-in inform	nation on a separate	e page if app	plicable.)				
☐ FARM / AGRICULTURAL: % ☐ COMMERC	IAL: % Pur	pose: 🗆 New	Equip. Purchase	☐ Used	Equip. Purcl	hase Grow	th Replacement
MODEL:	L	С	REDIT TERMS:	% APR	YEA	ARS MONTHL	Y DOTHER
DEALER NAME & PHONE NUMBER:		1				ENT COST: \$	<u> </u>
L L							
Other Income: (Alimony, child support or maintenance need not be revealed if you do not wish it to be considered in determining your creditworthiness.) Source of Other Income: Source of Other Income:							
Amount: \$ Per: Month Year Other Amount: \$ Per: Month Year Other							
COMPLETE THE SECTION BELOW IF YOU HAVE INCOME FROM AGRICULTURE.							
Do you farm: FULL TIME PART TIME	# OF ACRES OW	VNED	=	# OF A	CRES REN	TED	
KIND OF CROP/LIVESTOCK	NO. OF ACRES	INCOME	DATE EST.	AMOUNT	OTHER	INCOME	AMOUNT
SEASONAL			\$			\$	
INCOME			\$			\$	
Bank/Credit References Name (free week history)							
Name (two year history) Account Number(s)							
Officer to Contact Phone Number				Other Account(s)			
Certification and Authorization of Individual(s) to Release Information: Each of the undersigned person(s), individually and on behalf of the above Applicant (collectively the "Signer"), hereby represents to Wells Fargo Financial Leasing, Inc., its subsidiaries and affiliates (collectively "WFFL") that (a) all information provided to WFFL in connection with this credit application, including, without limitation, tax returns, financial statements, accountants' statements and the information set forth above, is true and correct and (b) this application is made for the sole purpose of obtaining credit from WFFL for commercial or agricultural (and not for personal, family or household) purposes. Signer hereby authorizes WFFL and any of its affiliates and potential or actual assignees to obtain any business and/or personal financial information, from time to time, including, without limitation, information from any consumer reporting agency, credit bureau or other reporting source regarding Signer's and/or Applicant's credit history, for purposes of (i) evaluating this application, (ii) monitoring any and all leases, loans and other financial transactions entered into as a result of this application, (iii) extending, renewing or amending any such lease, loan or other contract, and/or (iv) evaluating any request by Signer or Applicant for additional credit in the future. Signer hereby authorizes and instructs any consumer reporting agency, financial institution and other persons or entities possessing information about Signer and/or Applicant to furnish WFFL with all such information in response to an inquiry from WFFL both now and at any time in the future. Signature: X Date: Signature: X Date:							
Vendor/Supplier's Certification: By submitting this application to Wells Fargo Financial Leasing, Inc., its subsidiary or affiliate ("WFFL"), Vendor, by and through the individual employee or representative of Vendor who is							
By submitting this application to Wells Fargo Financial Le transmitting this application to WFFL, hereby represents Vendor's knowledge, (2) in the event Vendor later discovendor is submitting the above credit application on beh for the purpose of obtaining credit from WFFL for commethe application, if any (each, a "Principal") has expressly financial and other information about the Applicant and information sources (each, a "Reporting Source"), and (Reporting Sources to furnish directly to such Funding Sources).	and certifies to WFFL thers that any of the about the credit application of the credit application of the credit or agricultural (and authorized Vendor and each such Principal, in (5) the Applicant and e	nat: (1) all in ove information out named about d <u>not</u> for pers d any potenticuluding but n ach such Prin	iformation contain on is not correct, \ ove (the "Applican sonal, family or ho al funding source not limited to, info icipal, if any, has	ned in the above tendor will so tendor will so tendor with the cousehold) pure (such as WFormation from expressly ac	ove reference ubmit to WF express perr rposes, (4) t FFL) (a "Fundame n banks, co	ted credit application FL a new application mission, and at the each the Applicant and each ding Source") to obt nsumer reporting ag	is true and correct to the best of with the correct information, (3) xpress direction, of the Applicant the person named as a principal in ain business and personal credit, encies, credit bureaus and other

RETURN COMPLETED APPLICATION TO WELLS FARGO EQUIPMENT FINANCE - MANUFACTURER & DEALER FINANCE Attn: VENDOR AG, TEAM 19 - FAX NO. 800-600-7192