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| You are applying for a CNH Capital Retail Installment Contract / Lease and a Commercial Revolving Account If you already have a CNH Capital Commercial Revolving Account check here: <input type="checkbox"/> If you do not wish to be considered for a Commercial Revolving Account please check here: <input type="checkbox"/> | | | | | | | | | | | | *Equipment Use: <input type="checkbox"/> AG <input type="checkbox"/> CE | | |
| Applicant | IF INDIVIDUAL - (Sole Proprietorship) *First Name _____ *M.I. _____ *Last Name _____ | | | DBA _____ | | | | | | | | | | |
| | IF Legal Business Entity *Exact Business Name _____ | | | | | State Organization ID Number _____ | | State Formed _____ | | Formation Date _____ | | | | |
| | *(Check One) <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Municipality If a business type is checked, please provide the officer, partner, or member's personal information in the section labeled Co-Applicant or Officer/ Partner/ Member. A copy of the partnership agreement is also required. | | | | | | | | | | | | | |
| | *Tax ID or SSN _____ | | | *Date of Birth (individual) _____ | | | *Street Address _____ | | | *City _____ | | *State _____ | | *County _____ |
| | *Zip Code _____ | | *Home Phone (Individual) _____ | | *Business Phone _____ | | *Occupation: <input type="checkbox"/> Full-time Farmer <input type="checkbox"/> Part-time Farmer | | <input type="checkbox"/> Custom Operator <input type="checkbox"/> Excavator/Grading/Trenching <input type="checkbox"/> Building Contractor <input type="checkbox"/> Lawn & Ground Care/Snow Remove/Landscape <input type="checkbox"/> Construction | | <input type="checkbox"/> Road & Street <input type="checkbox"/> Logging <input type="checkbox"/> Rental Yard | | | |
| | Email _____ | | *Yr Business Est. _____ | | # of Acres Owned/Rented _____ | | Annual Gross Income _____ | | Net Worth _____ | | *Income Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Seasonal | | *Residence (If appl) <input type="checkbox"/> Own <input type="checkbox"/> Rent | *Yr Residence Est. (individual) _____ |
| | Bank Name _____ | | | Bank Phone # _____ | | | Contact Name _____ | | | Account # _____ | | Approximate total checking & savings balance _____ | | |
| | *Has the applicant had any unsatisfied judgments against them in the past 7 years, had equipment repossessed in the past 7 years, or been declared bankrupt in the past 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify: _____ | | | | | | | | | | | | | |
| | Co-Applicant or Officer / Partner / Member | *First Name _____ | | | M.I. _____ | | *Last _____ | | | *SSN _____ | | | *Date of Birth _____ | |
| | | *Street Address _____ | | | | | *City _____ | | | *State _____ | | *County _____ | | *Zip Code _____ |
| Home Phone _____ | | | Business Phone _____ | | | Occupation (describe) _____ | | | *Yr Business Est. _____ | | *Yr Residence Est. _____ | | | |
| Equipment Info | *N/U | Year | *EQ Type | *Manufacturer | *Series | *Model | Description | | | *Serial #/VIN # | *Hours | *Sales Price | | |
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| *Will any of this equipment that you are purchasing be rented to another party? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | *Total Sales Tax \$ _____ | | *Total Sales Price _____ | | |
| Trade Info | *Year | *EQ Type | *Manufacturer | *Series | *Model | Description | Serial #/VIN # | Hours | *Allowance | *Amt. Owing | *Net Trade-In | | | |
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| | | | | | | | | | | | | | | |
| If customer owes another financial institution, owe to whom: _____ | | | | | | | | | | | *Total Net Trade-In _____ | | | |
| Terms | *Program # _____ | | Program Description _____ | | | *Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly | | <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Irregular | | If Frequency is Irregular please describe: _____ | | *Term _____ | *Cash Down Payment \$ _____ | |
| | Contract/Lease Date _____ | | Interest Start Date _____ | | First Payment Date _____ | | Skips (months) _____ | | # of Advanced Payments _____ | Annual Usage _____ | Purchase Option \$ _____ | *Estimated Amt Financed \$ _____ | | |
| Ins. | PDI Company Name _____ | | | PDI Deductible _____ | | PDI Agent Name _____ | | | PDI Agent Phone # _____ | | PDI Policy # _____ | | Liability Company Name _____ | |
| * Required Information for Credit Approval By signing below, you certify that: 1) This application is made for the sole purpose of obtaining Business/Commercial Credit. 2) You have read and agree to the terms and disclosures on the second page of this application. 3) You are authorized to sign on behalf of the Applicant. The person(s) signing below and or when all individual(s) on whom personal information is provided herein (including any proprietor, and any guarantor, partner or officer of Applicant) also agree, individually and not on behalf of Applicant, that CNH Capital America LLC ("CNH Capital") may obtain credit reports on said person(s) from credit reporting agencies, and otherwise investigate the credit of said person(s), in connection with CNH Capital's credit inquiry with respect to this Application, and hereby instructs all credit reporting agencies to provide CNH Capital with such credit reports upon request. | | | | | | | | | | | | | | |
| Applicant's Signature _____ Title _____ Date _____ (if applicable) | | | | | | | | | | | | | | |
| Co-Applicant or Officer, Partner, Member Signature _____ Title _____ Date _____ (if applicable) | | | | | | | | | | | | | | |
| ADDITIONAL REVOLVING ACCOUNT DETAILS: Personal Guaranty: (Required for Corporations or LLC's in business less than 2 yrs and all partnerships. Guarantor must be owner, general partner, or corporate officer). If a revolving account (the "Account") is opened in response to the foregoing application, in consideration of CNH Capital granting Applicant the Account, the undersigned Guarantor hereby unconditionally, absolutely and irrevocably guarantees the prompt and full payment and performance of all of Applicant's obligations under the agreement establishing the Account (the "Agreement"), and further agrees, in the event of any default under the Agreement, to pay the total balance due on the Account upon demand, without requiring CNH Capital or its assignees to make demand and/or proceed first to enforce the Agreement against the Applicant. The Guarantor hereby waives notice of any modifications, amendments, or extensions of the Agreement, and of Applicant's non-performance or breach of the Agreement. The payment obligations of the Guarantor are the direct, primary, and continuing obligations of the Guarantor and Guarantor's heirs, successors and assigns, and not merely a guaranty of collection. By signing below the Guarantor also agrees, individually and not on behalf of Applicant, that CNH Capital may obtain credit reports on said Guarantor from credit reporting agencies, and otherwise investigate the credit of said Guarantor, and hereby instructs all credit reporting agencies to provide CNH Capital with such credit reports upon request. | | | | | | | | | | | | | | |
| *Guarantor Signature _____ | | | *First Name _____ | | | *Last Name _____ | | | SSN _____ | | *Date of Birth _____ | | | |
| *Street Address _____ | | | | | | *City _____ | | | *State _____ | | *Zip Code _____ | | | |
| *Information required if guarantor signature is obtained | | | | | | | | | | | | | | |
| Authorized Revolving Account Users | | | First Name _____ | | | M.I. _____ | | | Last Name _____ | | | First Name _____ | M.I. _____ | Last Name _____ |
| DEALER USE ONLY: If you entered the revolving account application in Fast App or phoned-in the application, please fax the signed application to 1-800-472-3093. If approved, please insert the account number here. <u>Account Number:</u> _____ | | | | | | | | | | Requested Credit Limit: \$ _____ | | | | |

Agreement

Applicant and Co-Applicant, if any, (collectively "Applicant", "you" and "your"), submit this application for the purpose of obtaining business/commercial credit from CNH Capital America LLC ("CNH Capital"). Applicant agrees that CNH Capital may obtain a consumer credit report from one or more consumer reporting agencies (credit bureaus) in connection with your application and as otherwise allowed by applicable law. Applicant agrees that CNH Capital shall be permitted to share such information and information regarding the Applicant and CNH Capital's credit experience with Applicant with credit reporting agencies, the dealer referenced above, other creditors of Applicant, third parties that CNH Capital reasonably believes are conducting credit inquiries in accordance with applicable law, and subsidiaries and affiliates of CNH Capital, and to use the aforementioned information in collecting any debt of Applicant owed to CNH Capital. Applicant agrees to allow CNH Capital to verify your employment, pay, assets, and debts and that anyone receiving a copy of this application is authorized to provide CNH Capital with such information. You further authorize CNH Capital to gather whatever credit and employment history necessary and appropriate in evaluating this application. CNH Capital may keep this application and information about you whether or not the application is approved. Applicant certifies that the information on the first page of this application is true and complete.

Applicant agrees that if a revolving account (the "Account") is opened in response to this application; (i) the Account and any related cards (if cards are issued to access the Account) shall be governed by the terms and conditions of the agreement establishing the Account as it may be amended from time to time; (ii) Applicant shall be responsible for all charges, advances and fees made or incurred under the Account by Applicant or anyone authorized or permitted by Applicant to use the Account and/or the card(s) (if cards are issued to access the Account).

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. 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.

State Notices

Ohio Residents – The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

California Residents – A married applicant may apply for an individual account.

Maine Residents - You have the right to choose the agent and insurer for the insurance required by this transaction, but the insurer must be approved by the creditor.

New York Residents - A consumer credit report may be obtained in connection with this application and may also be requested or utilized in connection with an update, renewal, or extension of credit. If you request, you will be informed if a consumer report was obtained and you will be provided with the name and address of the consumer reporting agency that gave us the report.

Vermont Residents – By signing below you authorize us and our employees or agents to obtain and verify information about you (including one or more credit reports, information about your employment and banking and credit relationships) that we may deem necessary or appropriate in evaluating your credit application. If your application is approved and the credit is given, you also authorize us, and our employees and agents, to obtain additional credit reports and other information about you in connection with reviewing the account, taking collection on the account, or for any other legitimate purpose.

Married Wisconsin Residents – Wisconsin law provides that no agreement, unilateral statement or court decree relative to marital property shall adversely affect a creditor's interest, unless prior to the time credit is granted the creditor is furnished a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision. You must indicate the name of your spouse in the co-applicant/spouse section of this application.

Illinois Residents – (a) No applicant may be denied a credit card on account of race, color, religion, national origin, ancestry, age (between 40 and 70), sex, marital status, physical or mental handicap unrelated to the ability to pay or unfavorable discharge from military service; (b) the applicant may request the reason for rejection of his or her application for a credit card; (c) no person need reapply for a credit card solely because of a change in marital status unless the change in marital status caused a deterioration in the person's financial position.; and (d) a person may hold a credit card in any name permitted by law that he or she regularly uses and is generally known by so long as no fraud is intended thereby.