

## **Commercial Equipment Credit Application**

BARCODE21917A

Page 1 of 1

## **APPLICANT IDENTITY VERIFICATION**

21917A Rev. 12/19 Previous editions may not be used.

Federal faw requires verification of an individual's identity for financial transactions. Each applicant and any guarantor must present his/her unexpired driver's license from their state of residence, or, if none, then their official unexpired government photo identification card, to an authorized dealer representative. THE AUTHORIZED DEALER REPRESENTATIVE WILL VERIFY THE APPLICANT TO THE PHOTO, AND WILL CERTIFY THE FULL EXACT PRINTED NAME, ADDRESS, AND EXPIRATION DATE ON THE IDENTIFICATION FORM CHECKED BELOW IS AN EXACT MATCH TO THE INFORMATION ON THIS APPLICATION, to comply with its Retail Financing Agreement with CNH Capital. CALIFORNIA RESIDENTS: BEFORE PROVIDING YOUR PERSONAL INFORMATION, YOU MAY REVIEW YOUR RIGHTS UNDER THE CALIFORNIA CONSUMER PRIVACY ACT OF 2018 AT WWW.CNHINDUSTRIALCAPITAL.COM/CCPA OR REQUEST A COPY FROM YOUR DEALER.

	PPLI	CANT (If a	Partner	ship, obtair	а сор	y of the Part		<del></del>		- 100				/ <del>/ - ·</del> · ·	
<del></del>	AG		on Ag bu	siness purpo	505	individua	al OI	R Busines	ss Type:	Corp [	Jrrc (	LLP [	Partners	hip Mu	nlcipality
Identification:	Explra	ation Date:		Drive	r's Lice	nse Pass	port	Other	Governme	ent Issued ID	(describ	e):			
Legal INDIVID	UAL N	ame (as PRIN	ITED on a	above Identifica	tion):		\$	SSN:			Date of	Birth:	Primary	Phone:	
Legal BUSINESS Name (NOT APPLICABLE IF APPLYING AS AN INDIVIDUAL):								Tax ID: State For				ormed:	med: Business Phone:		
Residential Address of INDIVIDUAL or Physical Address of BUSINESS								City: County:			-	State:	Zip Code	:	
Occupation:	F	ull-time Farme	er B	uilding Contrac	tor	Road & Stree	et E	Bank Name:			1		<u> </u>	<u> </u>	
Rental Yard	~			xcavating/Tren		Construction		Bank Contact:							
Logging	□ c	ustom Opera	tor 🔲 La	awn & Landsc	andscape			Bank Phone:							
Year Business	Eşt.:		Year F	Residence Est.	Est. (Individual):			Applicant Email Address:							
SECONDAR	RY AP	PLICANT													***
Со-Арр	C	officer	Partne	r Guara	ntor	Individua	ıl OF	R Busines	ss Type:	Com	LLC	LLP	Partners	hln <b>M</b> u	nicipality
Identification:	Expire	tion Date:			r's Lice	<del></del>			:-	nt Issued ID				тр на	- Indipanty
		-	TED	<del></del>					GOVERNING	111 155000 1D	т		TT		
Legal INDIVIDUAL Name (as PRINTED on above identification):								SSN: Date of E				Birth: Primary Phone:			
Legal BUSINE:	SS Nan	ne (NOT APPI	-ICABLE	IF APPLYING A	ING AS AN INDIVIDUAL):			Tax IO:			State F	State Formed:		s Phone;	
Residential Ad	idress (	of INDIVIDUA	L or Phys	sical Address of	ress of BUSINESS			City: County:				1	State: Zip Code		
Year Business		Residence Est.	al):	A	Applicant Email Address:						<u> </u>				
New/Used Year   Equipment Manufacturer / Description								Model Hours Sec			Serial	al/PIN Sales		Sales Pric	<u> </u>
						·-··			1	11.00.0		<u> </u>		Odies i iii	
	İ	~								<del></del>	+				
	-								<del>                                     </del>	1	+				
Year Trade-I	n Fault	ment		Model	House	Serial/DIN		Allowance	•	Amount Ow	. L	-1 Td- I-	10	T- (4 - 4 4)	
Year Trade-In Equipment Model					Hours Serial/PtN			Amount C		Amount Ow	ed Net Trade-In		Owea	Owed To / Acct #	
<del></del>				<del> </del>		<u> </u>		<del> </del>							
				<u> </u>		L									
Cash Down	Pr	ogram #	Program	Description		Effective	Date	Intere	st Start Da	te First Pay	ment Da	te Term	Frequenc	y Est. A	nt, Financed
Insurance Car	rier				Po	olicy#			Agent					Phone	<del></del> <del>-</del>
or more consun- proprices that CN ugencles, the D upstales and or other means,	ner rep Such p H Capi Dealer r d affilia . Applic apital will illustrati Capital u using the par the par of CNI us assig us assig the par of CNI us assig the CNI the CNI The Ohl ment or	orting agencic uproses may tai shall be peferenced belietes of ChM tes of ChM	es (credit include a primitted to cow, other apital, an apital, an allow CNH mation. CNH including y execute en holder (but not i on 1031 e ent and the reredit reses of reverse ors makes.	bureaus) and ussisting in male of disclose such creditors of April of with the work of April of April of the April of	other initialized in the control of	or(s), (collectively ormation about y ormation about y ormation about y edit declsion, se ation and information and informatio	you in the control of	connection connection carlon, sec to Capital recisions, sec to Capital recisions of the Capital	with this to with this to widery man- e Account assonably be egulators, unclai Inform bout you we's you will be to will b	ransaction for ket sale and CNH Cale leves are continuous authorized to mber, that Color is the continuous authorized to mber, that Color is the continuous as e following in the lease and the continuous to ey in connection or for other in a gagenco. Nill it reporting in the prior to the total and continuous are must be a continuous and continuous and continuous are continuous and continuous are continuous are continuous and continuous are continuous and continuous are continuous and continuous are con	or all legical site of a legical site of a conduction is to raise that anyout the appointment of the appointment of a conduction in a conduction of the appointment o	timate purpo	ses and an activity a not with ya not with ya intension account a copy of inproved; 4, on the servicer, as bealer shall ents necespoleater, ing Exchangurat, nor Exchangurat, or NOTIC enewal, or ses. Upon ress. Upon resis in law price preside the credition.	s otherwise a mod monitorin. Ind monitorin. Ind monitorin specially a personal properties of the same	illowed by gg; 3) Applican h credit reports applicable la ndary market in is authorize ussions of finares that by obligator it retaile the photo of a lien or see bely notified it, Inc., a qualified RERESIDENT ORK AND credit for whith york residents we against in each individe agreement, a convention.
nis application.	•					Pro-company	41		5			approal		-socially Af	rpinouit sectio
Signature of Pri	mary A	pplicant or Re	presenta	tive Print	ed Nam	•					-	Title (not	for Individ	ual Applicant)	Date
															· <del>_</del>
ignature of Se					ed Nam									ızi Applicant)	Date
	ed certi	fies the name	, addres:	s and expiratio	n date d	on the Identifical	tion c	hecked abo	ove is an e	xact match	to the ini	ormation on	this Appl	ication.	
ionature of Aut	hoder	l Dealer Se	ncontati	<u> </u>	. J ht										
ignature of Aut	u 10112 <b>9</b> 0	י המשפר עפטרי	oseni&üV(	o Printe	ed Name	8						Dealeri	# Apo	) 学	Date