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	·/Guarant	or Data	- Proprietor, Co	orporate Officer, Part	tner, Gener	al Partne	r (if a	person), Ll	C Managi	ng Member (if a pe	rson)
Name						ĺ	% Company Ownership			Home Telephone	Date of Birth
Home Address			City	City		tate	County		Zip Code	Social Security Number	
Name				<u>.</u>		1	% Cor	npany Own	ership	Home Telephone	Date of Birth
Home Address				City		S	tate	County		Zip Code	Social Security Number
Applicant				•				•			•
(If a corporation, LLC, LP or other organization, use EXACT registered name.)								ne Number		Fax Number	
Applicant's Name							tact P	erson's Cel	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: /	
									hip Other (List Type)		
Country of Cit	izenship		Stat	e of Organization/Re	gistration	Fedei	al Tax	ID/SSN N	umber		
Equipment	& Usage:	(Include	e trade-in infor	mation on a separate	e page if ap	plicable.)					
☐ FARM / AGE	RICULTURAL	: %	☐ COMMERC	CIAL: % Pur	pose: 🗖 New	v Equip. Pu	rchase	☐ Used	Equip. Purc	hase Growt	h Replacement
MODEL: CREDIT							TERMS:% APR YEARS				
DEALER NAME	& PHONE N	JMBER:			I				EQUIPM	ENT COST: \$	
Other Incor	ne: (Alimo	nv. child	support or ma	intenance need not h	ne revealed	if you do	not w	ish it to be	considere	d in determining v	our creditworthiness.)
Source of Oth	-					-		er Income:		,	
Amount: \$ Per:  Month  Year  Other Ar					Amount	unt: \$ Per: Month Year Other					
COMPLETE	THE SECT	TION BE	LOW IF YOU	HAVE INCOME F	ROM AGRI	<b>ICULTUF</b>	RE.				
Do you farm:	」 farm: FULL TIME ☐ PART TIME ☐ # OF ACRES OWNED # OF ACRES RENTED										
	KIND	OF CROP/I	LIVESTOCK	NO. OF ACRES	INCOME	DATE	EST.	. AMOUNT	OTHER	INCOME	AMOUNT
SEASONAL INCOME							\$			\$ \$	
Bank/Credi	t Defere						P				
Name (two ye				٨٥٥٥	ount Numbe	or(c)					
ivaine (two ye	ai ilistory,	,		Acco	Julic Nullibe	EI (S)					
Officer to Contact Phone Number Other Account(s)											
Each of the und affiliates (colled accountants' sta agricultural (ampersonal financi and/or Applican application, (iii) hereby authoriz with all such inf Signature: X Vendor/Suppl By submitting this Vendor's knowle Vendor is submifor the purpose	ersigned per titively "WFF stements and not for per al informatic t's credit his extending, research in es and instrormation in ier's Certifi his application edge, (2) in titing the ab- of obtaining if any (each	son(s), inc. L") that ( d the infor- resonal, farm, from tire story, for prenewing or ucts any cresponse to  cation: to WFFL, I the event \( \) vove credit credit for , a \( \) "Princip, inc.	dividually and on the all information set forth all or household) me to time, includ ourposes of (i) ever amending any strong an inquiry from an inquiry from a Fargo Financial Lenereby represents application on bether the company of the community of the community of the community of the community and the community and the community of the commu	n provided to WFFL in above, is true and corn purposes. Signer hereting, without limitation, aluating this application uch lease, loan or other gagency, financial instigues. WFFL both now and at a Date:  easing, Inc., its subsidiation and certifies to WFFL the vers that any of the aboul of the credit applicaterical or agricultural (and y authorized Vendor and control of the control of the credit of the credit application and certifies to VFFL the substitution of the credit application and control of the credit applicatio	icant (collecticonnection ect and (b) to yo authorizes information fin, (ii) monito contract, and itution and of any time in the ary or affiliate hat: (1) all in ove information the named aby do not for perid any potent	with this chis applic is WFFL and from any coring any a d/or (iv) ex ther persone future.  Sign.  e ("WFFL"), information on is not coove (the "A sonal, familial funding	credit a ation is any of onsume nd all I raluatin ns or e ature: , Vendo contair orrect, v pplican ly or ho source	application, made for the its affiliates reporting a leases, loans g any reques white posses when the above the abov	including, version to the sold purpose in and other strong information in the sold purpose in the sold pur	without limitation, tax toose of obtaining cred cial or actual assignee it bureau or other rep financial transactions or Applicant for additination about Signer and individual employee or credit application if FL a new application if FL a new application if the Applicant and each ding Source") to obta	easing, Inc., its subsidiaries and returns, financial statements, it from WFFL for commercial or is to obtain any business and/or orting source regarding Signer's entered into as a result of this onal credit in the future. Signer ind/or Applicant to furnish WFFL ite:  Tepresentative of Vendor who is is true and correct to the best of with the correct information, (3) press direction, of the Applicant in person named as a principal in in business and personal credit, incies, credit bureaus and other

information sources (each, a "Reporting Source"), and (5) the Applicant and each such Principal, if any, has expressly authorized Vendor and any Funding Source to instruct any and all Reporting Sources to furnish directly to such Funding Source all such information about the Applicant and each Principal.

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