

## **APPLICATION FOR CREDIT**

					E-MAIL ADDRESS						
	APPLICANT'S NAME (La	SOCIAL SECURIT	SOCIAL SECURITY NO.		DATE OF BIRTH (MM/DD/YYYY)		TELEPHONE NUMBER				
GENERAL	MAILING ADDRESS				CITY		STATE	ZIP			
	PHYSICAL ADDRESS (I	F DIFFERENT THAN MAILING)		COUNTY (REQUIRED)		COUNTY AND STATE OF WHERE EQUIPMENT WILL BE KEPT					
	US CITIZEN	IF NO, PERMANENT RESIDI			RRIED	DO YOU F		# OF ACRES OWNED/RENTED			
	EQUIPMENT USE:		IDUSTRIAL% OTHER			AMILY/HOUSEHOLD% _% CRIBE		YEARS IN FARMING BUSINESS			
BUSNESS or Co-Buyer(s)	LEGAL NAME UNDER W	3:	YEARS I	YEARS IN BUSINESS							
	FED TAX ID	ORGANIZATIC	ORGANIZATION ID			STATE OF ORGANIZATION					
	**ANYINDI PRINCIPAL/OWNI	VIDUAL OR ENTITY WITH 25%	OR MORE OWNERSH	HIP OR CONTR				CTION IN ITS ENTIF	RETY**		
		TAX ID				BIRTH					
BANK INFO	PRIMARY LENDER	PRIMARY LENDER NAME CITY, S			TELEPH	HONE		CONTACT			
which the ins and assess reditworthin whether or n equire that compliance <i>Wis. Stats.</i> a obligation to equires all fi us to identify <b>By signing</b> nformation p	surance you obtain in connect ment policies of the insurer a less of the insurer and scope ot a consumer report was red all creditors make credit equa with this law. <b>NOTICE TO MA</b> adversely affects the interests the creditor is incurred. <b>NOTIK</b> inancial institutions to obtain, v vyou. We may also ask to see <b>below</b> , I, whether signing ind provided in this application is tr	S: If married, you may apply for a sion with the credit you are applying and its ability to service the policy, of coverage chosen. NOTICE TC quested, and, if it was, we will tell you ally available to all credit worthy ou <b>RRED APPLICANTS RESIDIN</b> of the creditor unless the creditor CE TO ALL CUSTOMERS: USA erify and record information that id e your driver's license or other iden lividually as an Applicant, Co-Applie ue and correct and given for the puestion.	for is placed. Your right o Your choice of insurer <b>D NEW YORK AND R</b> ou the name and addres istomers, and that credit <b>G IN WISCONSIN:</b> No prior to the time the cred PATRIOT Act – Custor entifies each person who tifying documents. icant or guarantor or as urpose of obtaining credit	ffree choice is s will not affect the HODE ISLAND so of the consumer reporting agen provision of any tis granted, is mer Identification o applies for a lo officer, partner oc ; (2) instruct and	ubject only to our right to appro ne credit decision or credit ten <b>RESIDENTS:</b> A consumer raner reporting agency that furnis cies maintain separate credit I marital property agreement, u furnished a copy of the agree Program – Enacted to help th an. When you apply for a loar or manager of the Applicant or authorize DLL Finance LLC a	we the insurer yo ms in any way, eport may be re- shed the report. I histories on each ment, statement ment, statement ne government fit, n we will ask you Co-Applicant ar nd/or its affiliates	u selecton a reasonably except that we may imp quested in connection wi <b>NOTICE TO OHIO RES</b> in individual upon reques int under section 766.59 I or decree, or has actual ght the funding of terroris for your name, address, ad whether or not I am p and related parties ("DLL	non-discriminatory ba cose reasonable req ith this application. If y <b>IDENTS:</b> The Ohio kith <i>Vis. Stats.</i> or court de I knowledge of the ac m and money launde clate of birth and othe ersonally liable for any ") to check credit, cor	asis related to the solven uirements concerning the our ask us, we will tell yo avs against discriminatic sommission administe cree under section 766. Werse provision when the ring activities. Federal la rinformation that will allo y credit: (1) affirm that the tact references, and ver		
nstruct and a of any credit 5) authorize DLL may ref substance a monitoring a hat (a) DLL by law; and	authorize DLL to obtain consu- report, credit investigation or e and direct DLL to use any su- tain any information obtained a coeptable to DLL sufficient to and servicing my account, and may monitor and record telep (c) DLL may contact me using s primarily for personal, family	estions about DLL's credit experie umer reports on me, in DLL's sole imployment investigation (including ach results to determine if I qualify f as part of the application process w perfect a security interest in collati (10) authorize DLL to give a copy schone calls regarding the account or household purposes, I acknow coordance with applicable law. Fo	discretion, as part of this the information contained for an offer of credit; (6) a whether or not the request eral arising in connection of this application to an created to assure the qui address I provide to DLL wledge having read the a	application and d in this applicat uthorize and dir sted credit is grau with financing yone who has a ality of services or using any tel idditional disclos	while any credit granted as a ion) with any dealer, manufacti ect DLL to notify a Dealer abor tted; (8) authorize DLL to prep applied for herein; (9) authoriz greed to pay debts incurred or or for other reasons; (b) DLL n aphone number or email addre sures included on this applicati	result of this app urer or other pers ut whether I qual vare and file again re DLL to provide in the basis of thi nay use automat ess DLL obtains ion. I consent to	lication remains unpaid; ( ion assisting me in attem) ify for any offers and the nst Applicant, Co-Applica e information about this tr s application. If DLL exte ic dialing equipment whil from another source, even DLL sharing with others	(4) authorize and direction obtain an extending to obtain an extender of any such of int and/or me, a finance ansaction to others for ansaction to others for and credit as a result e servicing or collecting of the number is for information concerning information concernin	ct DLL to share the resunsion of credit (a "Deale fers; (7) acknowledge th sing statement in form and or the purpose of initiatir of this application, I agring the account, as allow a mobile telephone. If the		

APPLICAN	NT		CO-APPLICANT				
					-		
Signature	(Individual)	Date	Signature	(Individual)	Date		
Signature	Title/Capacity	Date	Signature	Title/Capacity	Date		
Ū.	(Indicate Partner/Officer/Manager/Guarant	or)		(Indicate Partner/Officer/Manager/Guarar	ntor)		