

Finance Credit Application

Sales Rep: _

_____ Phone: ____

Email: ____

Fax:

READ CAREFULLY BEFORE SUBMITTING THIS APPLICATION: We recommend that you print the Application, sign it below and email or fax it to us at the address/number set forth at the top of this application. If you send this Application by unencrypted and non-secure e-mail, the contents, including non-public information, may be at risk, and we are not responsible for the security of the contents or for any theft or loss of data during e-mail transmission. Your electronic signature on this Application and any related documents shall be unconditionally valid and legally enforceable, and you agree not to contest the validity or enforceability of any electronic signature (or the authority of the electronic signature to sign).

Company Information											
Company Name OR Individual Last, First and Middle Name, Suffix							DBA				
Street Address				City				State/Zip			
Phone #	Fax #			Website	ite				Gro	Gross Annual Revenue	
Contact Name & Phone #			Contact Email Addre	ss		State C	Drganization ID	#	Fed	leral ID #	
Business Structure Sole Prop C Corp Sub S Corp]шс	tate of Incorporation	Date Est	ablished	Yrs in B	Business (Prese	nt Ownership)	Nature of B	Business/NAI	ICS Code (if known)
Equipment Location (If different from above)		I		1		1		L			
Owners , Partners and	Guaran	tors In	formati	on (<i>I</i>	Attach	sep	oarate	sheet	if ne	ecess	ary)
Name (Personal Guarantor/Principal/Partner/Officer)		Т	ïtle		Percent Owne	d	Social Se	ecurity #			Owner Since:
Address			City		State/Zip		Phone #				Date of Birth
Name (Personal Guarantor/Principal/Partner/Officer)			Title Per		Percent Owne	Percent Owned		Social Security #			Owner Since:
Address		C	îity		State/Zip		Phone #	1			Date of Birth
Payment Plan, Equipm	nent and	d Vend	or Inform	nati	on (At	tacl	h sepa	irate sl	heet	if ne	ecessary)
Term Options (months) 24 36 48 60		ance Structure	10% PUT \$1 0	ит 🗌	Fixed Purchase	e 🗌 F	MV or %	Total	Amount Fi	inanced	
Manufacturer/Year/Make/Model			Qty.		Equipment Co	ist		Total Equipmer	nt Cost		Delivery Date
Vendor Name			Contact Name				Contact Phon	e #		Contact F	Fax #
Vendor Address			Contact Email Address								
References (2 Year His	tory)										
Business Bank Name	Contact Name				Contact Ph		hone #		Contact	Contact Email	
Finance Company	Company Contact Name			Contact		ntact Phone #		Contact	Contact Email		
By submitting this Application, the undersign warrant as follows: The Huntington National make other credit inquiries about the applic HNB and its affiliates may share with one an applicant and the individuals; (c) the informa- information; (d) this Application is submitted the applicant. if an individual, is a citizen or	l Bank and its a ant and all suc other financia ation on or acc d in connection	agents ("HNI ch individual: l, credit and companying n with financ	B") may (a) obta s, and anybody other informati this Application cing solely for be	in comi contacti on abou is true usiness	mercial and ed in conne ut the applic and comple and comme	consur ection th cant an ete, and ercial pu	mer credit herewith m id such indi the under urposes an	reports, inve ay release a viduals and signed will r d NOT for pe	estigate any credi use shar notify HN ersonal,	reference it and fina red inforr NB of any family or	es and statements, and ancial information; (b) mation to market to the material change in any household purposes; (e)

all notices, disclosures, consents and warranties shall be deemed repeated for each future request, unless the applicant submits a new written application. HNB does not make offers or commitments to extend credit except in final signed documents and, in limited circumstances, in and pursuant to the terms and conditions of written commitment letters. Term sheets, proposal letters, approval letters and the like are not commitment letters.

Signature/Titl	e
----------------	---

Signature/Title

Date	
Date	

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.

EQUAL CREDIT OPPORTUNITY ACT. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact our Customer Service Manager, 1405 Xenium Lane N (PCC180), Plymouth MN 55441 (866-311-2755) within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006.