

# Credit Application



**KOBELCO Financial Services**

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A program provided by Wells Fargo Vendor Financial Services, LLC.

| Transaction Information  |                   |                               |
|--|-------------------|-------------------------------|
| Dealer Name _____  | Sales Rep _____   | Total Equipment Cost \$ _____ |
| Phone Number _____   | Fax Number _____  | Net Trade \$ _____            |
| Email Address _____  |                   | Cash Down \$ _____            |
| Address _____  | City/ST/Zip _____ | Taxes \$ _____ Fees \$ _____  |
| Term: <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> Other _____ | Rate _____        | Finance Amt \$ _____          |
| Product Type: <input type="checkbox"/> Loan <input type="checkbox"/> Lease <input type="checkbox"/> Other _____  |                   |                               |

| Equipment Information                                       |       |                    |          |       |
|---|-------|--------------------|----------|-------|
| Include additional details or attachments with application. |       |                    |          |       |
| Qty   | N/U   | Manufacturer/Model | Serial # | Price |
| _____   | _____ | _____              | _____    | _____ |

Trade-in/Additional Details \_\_\_\_\_

| Business Information  |  |  |             |                      |
|---|--|--|-------------|----------------------|
| Company Legal Name _____  | As registered with Secretary of State, if applicable |  |             | Phone Number _____   |
| Tradestyle/DBA _____  |  |  |             | Federal Tax ID _____ |
| Business Address _____  | City _____   |  | State _____ | Zip _____            |
| No PO/APO   |  |  |             |                      |
| Equipment Address _____   | City _____   |  | State _____ | Zip _____            |
| If different than business address - No PO/APO  |  |  |             |                      |
| Billing Address _____   | City _____   |  | State _____ | Zip _____            |
| If different than business/equipment address  |  |  |             |                      |
| Type of Business: <input type="checkbox"/> S-Corp <input type="checkbox"/> Non-Profit <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Government <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Rental <input type="checkbox"/> House |  |  |             |                      |

Time in Business \_\_\_\_\_ State of Formation \_\_\_\_\_ Tax Exempt  Yes  No

| Owner/Guarantor Information |                     |                   |           |  |
|-----------------------------|---------------------|-------------------|-----------|--|
| Name _____                  | Date of Birth _____ | Soc. Sec. # _____ |           |  |
| Home Address _____          | City _____          | State _____       | Zip _____ |  |
| Name _____                  | Date of Birth _____ | Soc. Sec. # _____ |           |  |
| Home Address _____          | City _____          | State _____       | Zip _____ |  |

The following authorization(s) shall apply to this application and subsequently for the purposes of update, renewal or extension of such credit and for reviewing or collecting the resulting account. A photostatic or facsimile copy of this authorization shall be valid as the original.

**BUSINESS Credit Information: Authorization for Disclosure**  
 Applicant hereby authorizes the release of credit information to Wells Fargo Vendor Financial Services, LLC or its designee (and any affiliates, assignees or potential assignees thereof) from any source including credit bureau reporting agencies and applicant's bank. I hereby represent that all of the information contained in this credit application is true, correct and complete. Applicant hereby authorizes Wells Fargo Vendor Financial Services, LLC to execute and file any UCC financing statements in its name upon approval of the application.

By (Signature) **X** \_\_\_\_\_  
Authorized Representative of Credit Applicant

Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_  
Please Print Name

**PERSONAL Credit Information: Authorization for Disclosure**  
 By signing below, the undersigned individual who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction Wells Fargo Vendor Financial Services, LLC or its designee (and any affiliates, assignees or potential assignees thereof) authorizing review of his/her personal credit profile from a national credit bureau.

Signature **X** \_\_\_\_\_  
An Individual

Name \_\_\_\_\_ Date \_\_\_\_\_  
Please Print Name

Signature **X** \_\_\_\_\_  
An Individual

Name \_\_\_\_\_ Date \_\_\_\_\_  
Please Print Name

ECOA 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, 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 is the Bureau of Consumer Financial protection, 1700 G Street NW, Washington DC 20006 and also the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580. If your application for business credit is denied or conditionally approved, you have the right to a written statement of the specific reasons for the denial or the conditional approval. To obtain the statement, please contact Wells Fargo Vendor Financial Services, LLC at 5000 Riverside Drive, Suite 300, Irving TX 75039 within 60 days from the date you are notified of such denial or condition. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

**KOBELCO SELECT PROGRAM**

- By checking this box, I am indicating that I AGREE to participate in the Kobelco Select Program described below.
- By checking this box, I am indicating that I DO NOT AGREE to participate in the Kobelco Select Program described below.

Kobelco Financial Services is proud to offer the Kobelco Select Program. If you elect to participate in the Kobelco Select Program, then if Wells Fargo Vendor Financial Services, LLC or its designees or affiliates (collectively, "WVFS") are not able to approve your application for credit, then the parties signing above hereby authorize and request that Kobelco Financial Services and/or WVFS send this Credit Application and the information contained in this Credit Application to TFG Financial Corporation ("TFG"). TFG has agreed to attempt to locate an alternative financing source for your transaction. By electing to participate in the Kobelco Select Program, you are hereby authorizing and requesting that WVFS provide this Credit Application and the information provided in this Credit Application to TFG, and agree that TGF can provide such information to one or any number of other financing entities ("designees"), and you authorize (1) the release of credit information to TFG and any of its designees; and (2) TFG and any designee to review the personal credit profile of any of the individuals that have signed above. Neither Kobelco Financial Services nor WVFS are affiliated with TFG or any of its designees and you agree to indemnify and hold harmless KFS and WVFS from any all claims related to TFG and its designees. WVFS is not receiving any consideration from you or from TFG or its designees for agreeing to forward your Credit Application and information to TFG.

Establishing a relationship with Wells Fargo: To help the United States Government fight terrorism and money laundering, it is Wells Fargo policy to request information that identifies each person or business that establishes a relationship with us. Therefore, for businesses, we will ask for your business name, street address and taxpayer identification number. For individuals, we will ask for your name, street address, date of birth and Social Security number. We may also ask to see identifying documents. Thank you for your cooperation.