

**Credit Application**  
Wells Fargo Equipment Finance, Inc.  
Specialty Vehicle Group

Kyle Bruer  
National Program Manager  
Specialty Vehicle Group  
Wells Fargo Equipment Finance, Inc.  
Phone: 612-667-8224 or 800-322-6220 ext. 78224  
Cell: 612-554-1602  
**Please Fax Application to: 866-608-7849**



<b>Vendor Name</b> (Supplier of Equipment)		Phone Number	
Vendor Address		Fax Number	
<b>Lessee (Borrower)</b> Legal Name		Phone Number	
Mailing Address		Fax Number	
Person to Contact		Email Address	
		<b>Tax ID Number (required)</b>	
<b>Organization Type</b> Corporation Partnership Sole Proprietorship Limited Liability Co. (LLC)			
<b>Equipment</b> New Used Replacement Growth Please Explain _____			
<b>Equipment Description</b> (Year, Make & Model) and <b>Location</b> (City, County & State)		Equipment Price	
		Less Trade	
		Less Down Payment	
Will the equipment be involved in handling and/or transporting hazardous waste? YES NO		Finance Amount	
<b>Current Fleet Information</b>			
# Dump Trucks	# Refuse Trucks	# Low Boy	# Service Trucks # Other
<b>Type of Financing Desired</b>		<b>Lease/Loan Term</b>	
Loan	Lease (\$1.00 purchase)	Lease (TRAC ____%)	Other _____
			36 48 60 72 84 Other _____
<b>Lessee/Borrower Credit Information</b>		# Commercial Accts	# Residential Accts
Year Established	# of Employees	Annual Revenue \$	Backlog \$
<b>Top Customers</b>			
____% of annual sales	Name _____	City, State _____	
____% of annual sales	Name _____	City, State _____	
____% of annual sales	Name _____	City, State _____	
<b>Owner/Guarantor Name #1</b>		Social Security Number	
Residential Address		Residential Phone Number	
<b>Owner/Guarantor Name #2</b>		Social Security Number	
Residential Address		Residential Phone Number	
<b>References</b>			
Bank Name	Account Number	Contact Name	Phone Number
Finance Company	Account Number	Contact Name	Phone Number
Finance Company	Account Number	Contact Name	Phone Number
Comments			

**Signatures**

I certify that the information stated in this application is true and correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You and/or your assigns are authorized to check my credit and employment history, obtain insurance information and to answer questions about your credit experience with me. I authorize you to contact my creditors and authorize any creditor so contacted to release to you such credit information as you may request.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT: For all transactions over \$250,000 please attach the following: 1) last two years FYE Financial Statements, 2) last two years Profit/Loss Statements and 3) latest interim statement with comparable prior year figures, if available. Notice: 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 apply to open an account or to add any additional service, we will ask you for your name, address, and taxpayer ID number and other information that will allow us to identify you. We may also ask to see other identifying documents. (2008-07-28)**