

Credit Application for Construction Equipment



Wells Fargo Equipment Finance | Construction Group | 2700 S. Price Rd. 3rd Floor | MAC S3928-034 | Chandler, AZ 85286 | Phone: 877-248-7007

Send completed applications to Dealer Support by fax 877-248-6955 or email equipment.finance@wellsfargo.com		
Dealer/Vendor Name (Equipment Supplier)	Dealer/Vendor Contact Name	Dealer/Vendor Phone #
Dealer/Vendor Address:		Dealer/Vendor Fax #
Applicant Legal Name:	Tax ID No. (required)	Phone #
Physical Address:	Billing Address:	Fax #
Email Address	Website	Years in Business: State of Organization
<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Individual	Date of Birth	Country of Citizenship Non-U.S.: Passport #
Year of Management Change:	# of Employees:	Annual Revenue: \$ Backlog: \$
Describe the nature of your business		
Insurance Company Name	Contact Name	Email Phone Number

Need for Equipment: <input type="checkbox"/> Growth <input type="checkbox"/> Replacement <input type="checkbox"/> Refinance	Approx. Delivery Date:
Equipment Description (Quantity, Year, Make, Model, Serial #, Price):	Total Equipment Price: \$
	Tax: \$
	Less Down/Trade: \$
	Doc Fees: \$
	Finance Amount: \$

*If lease, provide equipment location

Type of Financing Desired (choose one): <input type="checkbox"/> Loan <input type="checkbox"/> Lease* (\$1.00) <input type="checkbox"/> Lease* (Fair Market Value) <input type="checkbox"/> Other _____	Lease/Loan Term (months): <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> 72 <input type="checkbox"/> 84 <input type="checkbox"/> Other _____			
Top Customer Name #1	Location (City, State) % of Annual Sales			
Top Customer Name #2	Location (City, State) % of Annual Sales			
Owner/Guarantor #1 Name	Cell Phone #	Email Address	Social Security #	% of Ownership
Residence Address:	Country of Citizenship	Residence Phone #	Date of Birth	
Owner/Guarantor #2 Name	Cell Phone #	Email Address	Social Security #	% of Ownership
Residence Address:	Country of Citizenship	Residence Phone #	Date of Birth	

Has the Applicant, Guarantor(s), or Principal(s) of the Applicant ever been convicted of a Felony? No Yes
If yes, please explain:

Has the Applicant, Guarantor(s), or Principal(s) of the Applicant ever filed for bankruptcy? No Yes
If yes, date filed and please explain:

Financial References:				
Bank or Equipment Finance Company	Account #	Contact Name	Phone #	Fax #
Bank or Equipment Finance Company	Account #	Contact Name	Phone #	Fax #

Certification. The undersigned certify to Wells Fargo Equipment Finance, Inc., its parent, and affiliates (collectively, "WFEF") that the information stated in this application is true and correct. The undersigned understand that WFEF will retain this application whether or not it is approved. WFEF and/or entities to whom WFEF refers this application (each a "WFEF Party") are authorized to check the credit and employment history of the undersigned (including criminal background checks), obtain insurance information, and to answer questions about their credit experience with the undersigned. The undersigned authorize each WFEF Party to contact any creditors of the undersigned and authorize any creditor so contacted to release to such WFEF Party such information as such WFEF Party may request. The undersigned further authorize each WFEF Party to share this application and the undersigned's information, including credit bureau reports and credit references, with potential purchasers or assignees of transactions that result from this application. **Notice to Applicants and Guarantors:** To help the government fight the funding of terrorism, narcotics trafficking, trans-national organized crime, 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 or add any additional service, we will ask you for your name, address, and taxpayer identification number that will allow us to identify you. We may also ask to see other identifying documents and information relating to beneficial owners and we may verify compliance by you and other beneficial owners with requirements of U.S. Federal laws.

Applicant Signature:	Applicant Signature:
Print name and title: Date:	Print name and title: Date: