

APPLICANT IDENTITY VERIFICATION

Federal law requires verification of an individual's identity for financial transactions. Each applicant and any guarantor must present his/her unexpired driver's license from their state of residence, or, if none, then their official unexpired government photo identification card, to an authorized dealer representative. THE AUTHORIZED DEALER REPRESENTATIVE WILL VERIFY THE APPLICANT TO THE PHOTO, AND WILL CERTIFY THE FULL EXACT PRINTED NAME, ADDRESS, AND EXPIRATION DATE ON THE IDENTIFICATION FORM CHECKED BELOW IS AN EXACT MATCH TO THE INFORMATION ON THIS APPLICATION, to comply with its Retail Financing Agreement with CNH Capital.

PRIMARY APPLICANT (If a Partnership, obtain a copy of the Partnership Agreement)

Usage: <input type="checkbox"/> AG <input type="checkbox"/> CE or non Ag business purposes <input type="checkbox"/> Individual OR Business Type: <input type="checkbox"/> Corp <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Municipality				
Identification: Expiration Date: _____ <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other Government Issued ID (describe): _____				
Legal INDIVIDUAL Name (as PRINTED on above identification):		SSN:	Date of Birth:	Primary Phone:
Legal BUSINESS Name (NOT APPLICABLE IF APPLYING AS AN INDIVIDUAL):		Tax ID:	State Formed:	Business Phone:
Residential Address of INDIVIDUAL or Physical Address of BUSINESS		City:	County:	State: Zip Code:
Occupation: <input type="checkbox"/> Full-time Farmer <input type="checkbox"/> Building Contractor <input type="checkbox"/> Road & Street <input type="checkbox"/> Rental Yard <input type="checkbox"/> Part-time Farmer <input type="checkbox"/> Excavating/Trenching <input type="checkbox"/> Construction <input type="checkbox"/> Logging <input type="checkbox"/> Custom Operator <input type="checkbox"/> Lawn & Landscape		Bank Name:	Bank Contact:	
Year Business Est.:		Year Residence Est. (Individual):	Applicant Email Address:	

SECONDARY APPLICANT

Co-App <input type="checkbox"/> Officer <input type="checkbox"/> Partner <input type="checkbox"/> Guarantor <input type="checkbox"/> Individual OR Business Type: <input type="checkbox"/> Corp <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Municipality				
Identification: Expiration Date: _____ <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other Government Issued ID (describe): _____				
Legal INDIVIDUAL Name (as PRINTED on above identification):		SSN:	Date of Birth:	Primary Phone:
Legal BUSINESS Name (NOT APPLICABLE IF APPLYING AS AN INDIVIDUAL):		Tax ID:	State Formed:	Business Phone:
Residential Address of INDIVIDUAL or Physical Address of BUSINESS		City:	County:	State: Zip Code:
Year Business Est.:		Year Residence Est. (Individual):	Applicant Email Address:	

New/Used	Year	Equipment Manufacturer / Description	Model	Hours	Serial/PIN	Sales Price

Year	Trade-In Equipment	Model	Hours	Serial/PIN	Allowance	Amount Owed	Net Trade-In	Owed To / Acct #

Cash Down	Program #	Program Description	Effective Date	Interest Start Date	First Payment Date	Term	Frequency	Est. Amt. Financed

Insurance Carrier	Policy #	Agent	Phone

By signing below, you certify: 1) This application is made for the sole purpose of obtaining commercial business credit from CNH Industrial Capital America LLC ("CNH Capital"); 2) Primary applicant, Co-applicant(s), Officer(s), Partner(s) or Guarantor(s), (collectively "Applicant", "you" and "your"), agrees that CNH Capital may obtain a consumer credit report from one or more consumer reporting agencies (credit bureaus) and other information about you in connection with this transaction for all legitimate purposes and as otherwise allowed by applicable law. Such purposes may include assisting in making a credit decision, securitization, secondary market sale and assisting in collection activity and monitoring; 3) Applicant agrees that CNH Capital shall be permitted to disclose such information and information regarding the Account and CNH Capital's credit experience with Applicants, with credit reporting agencies, the Dealer referenced below, other creditors of Applicant, third parties that CNH Capital reasonably believes are conducting credit inquiries in accordance with applicable law, subsidiaries and affiliates of CNH Capital, and with its successors in interest, buyers, investors and regulators, in our efforts to raise capital through securitization, secondary market sale, or other means. Applicant agrees to allow CNH Capital to verify your employment, pay history and financial information, and that anyone receiving a copy of this application is authorized to provide CNH Capital with such information. CNH Capital may keep this application and information about you whether or not the application is approved; 4) Dealer discussions of financing options are for illustrative purposes only. CNH Capital will conduct its own review of your application; 5) You are authorized to sign on behalf of any entity listed; 6) You agree that by providing CNH Capital or an authorized CNH Capital dealer with any telephone number, including any mobile number, that CNH Capital and any servicer, agent or debt collector it retains, may contact you using that number, including automatic dialing and announcing device and prerecorded calls; 7) If this application is approved, Dealer shall again validate the photo identification of the parties when they execute the agreement as set forth above; 8) All signatories hereby authorize CNH Capital to file any documents necessary to record a lien or security interest in favor of CNH Capital as lien holder or secured party; 9) In the event that the applicant enters into a lease following submission of this application, Dealer is hereby notified that CNH Capital has assigned its rights (but not its obligations) under the lease to purchase the asset(s) described in the lease to CNH Capital Leasing Exchange Services, Inc., a qualified intermediary, as part of an IRC Section 1031 exchange. NOTICE TO CALIFORNIA RESIDENTS: A married applicant may apply for an individual account. NOTICE TO MAINE RESIDENTS: You have the right to choose the agent and the insurer for the insurance required by this transaction, but the insurer must be approved by the creditor. NOTICE TO NEW YORK AND VERMONT RESIDENTS: A consumer credit report may be obtained to evaluate this application and subsequently in connection with any update, renewal, or extension of credit for which application was made and for purposes of reviewing the account, increasing any credit line, taking collection action or for other legitimate purposes. Upon request, New York residents will be informed whether a consumer report was obtained, and if so, the name and address of the consumer reporting agency. NOTICE TO OHIO RESIDENTS: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. NOTICE TO MARRIED WISCONSIN RESIDENTS: Wisconsin law provides that no agreement, unilateral statement or court decree relative to marital property shall adversely affect a creditor's interest, unless prior to the time credit is granted the creditor is furnished a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision. You must indicate the name of your spouse in the co-applicant/spouse/Secondary Applicant section of this application.

X
 Signature of Primary Applicant or Representative _____ Printed Name _____ Title (not for Individual Applicant) _____ Date _____

X
 Signature of Secondary Applicant or Representative _____ Printed Name _____ Title (not for Individual Applicant) _____ Date _____

The undersigned certifies the name, address and expiration date on the Identification checked above is an exact match to the information on this Application.

X
 Signature of Authorized Dealer Representative _____ Printed Name _____ Dealer # _____ App # _____ Date _____