



# CREDIT APPLICATION

Consumer Usage / Horse Trailer - Individual

Credit Application #  
Dealer Name  
Dealer City/State  
Dealer Phone  
Sales Person

CUSTOMER INFO	*First Name	M.I.	*Last Name	*SSN	*Date of Birth	DBA
	*Street Address		*City	*State	*County	*Zip Code
	*Home Phone	Business Phone		Email Address		Driver's License
	*Occupation			*Primary Industry		

CO-APPLICANT	First Name	M.I.	Last Name	SSN	Date of Birth	
	Street Address		City	State	County	Zip Code
	Home Phone	Business Phone		Email Address		

ADDITIONAL INFO	Monthly Gross Income \$	*Child support or separate maintenance income need not to be revealed if applicant does not wish it to be considered as a basis for repaying this obligation.	Monthly Expenses \$	Net Worth \$	Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent	*Yr. Residence Est.
	If Current Yrs at Residence are Less Than 3 Yrs, Prior Street Address, City, State		*Has the applicant had any unsatisfied judgements rendered against them in the past 7 years, had equipment repossessed in the past 7 years, or been declared bankrupt in the past 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please specify:	
	Employer Name			Employer Phone #		Yr Employment Began

BANKING INFO	Bank Name	Contact Name	Bank Phone #
	Account #	Approximate Total Checking and Savings Balance \$	
	Main Equipment Lending Reference, Lender Name	Contact Name	Lender Phone # Account #

*N/U	Year	*Type	*Manufacturer	Series	*Model	Description	*Serial/VIN #	*Hours	*Sales Price			
									\$			
									\$			
									\$			
									\$			
Equipment Location, Address/Suite #, City								State	County	Zip Code	Home Phone #	Total Sales Price \$
*Will any of this equipment, that you are purchasing, be rented to another party? <input type="checkbox"/> Yes <input type="checkbox"/> No											Total Sales Tax \$	

Year	*Type	*Manufacturer	Series	*Model	Description	Serial/VIN #	Hours	*Allowance	*Amt. Owing	Net Trade-In
								\$	\$	\$
								\$	\$	\$
If customer owes another financial institution, owe to whom:										Total Net Trade-In \$

TERMS	<input type="checkbox"/> Contract/Loan	<input type="checkbox"/> Other	Program #	Program Description	*Frequency	<input type="checkbox"/> Semi-Annual	Rate	<input type="checkbox"/> Fixed	*Term	*Cash Down Payment \$
	<input type="checkbox"/> Fin. Lease				<input type="checkbox"/> Monthly	<input type="checkbox"/> Annual		<input type="checkbox"/> Variable		
	<input type="checkbox"/> Oper. Lease				<input type="checkbox"/> Quarterly	<input type="checkbox"/> Irregular				
Contract/Lease Date	Interest Start Date	First Payment Date	Skips (months)	# of Advanced Payments	Annual Usage	Purchase Option \$	Est. Amt. Financed \$			

INS	PDI Company Name	PDI Deductible	PDI Agent Name	PDI Agent Phone #	PDI Policy #	Liability Company Name
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\* Required Information for Credit Approval  
 (Total Sales Price + Total Sales Tax) - (Total Net Trade-In + Cash Down Payment) = Estimated Amt Financed  
 Comments:

Applicant (whether one or more, "Applicant") submits this application for the purpose of obtaining credit from CNH Capital America LLC ("CNH Capital"). Applicant hereby (1) requests that CNH Capital grant credit to Applicant on the terms applied for herein; (2) authorizes CNH Capital to investigate Applicant's credit worthiness, including without limitation by obtaining consumer reports from credit reporting agencies and other information and credit records and to use such information in collecting any debt of Applicant owed to CNH Capital; (3) authorizes Applicant's past and present lenders, lessors, landlords and other creditors to provide CNH Capital or its designee with any and all information that will assist CNH Capital in its credit inquiry; and (4) certifies that all information provided in this application is true and correct. **Applicant acknowledges that information concerning Applicant and transactions with CNH Capital may be communicated by CNH Capital to its affiliates, but the applicant may direct that such communication not be made by calling (800) 501-5711.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Signature of Co-Applicant(s) \_\_\_\_\_ Date \_\_\_\_\_