

ASV Capital (Phone 877-248-7007)
 1540 West Fountainhead Pkwy
 Tempe, AZ 85282

CREDIT APPLICATION
 FAX Application to 877-248-6955



COMPANY INFORMATION

Customer Legal Name _____ Yrs in Business _____ Current customer of ASV Capital (list acct#) _____
 Street Address _____ Nature of Business _____
 City/County/State/Zip _____ Phone No. _____ Fax no. _____
 Contact/Title _____ Federal Tax ID No. _____
 Equipment Location (if different from above) Street Address/City/County/State/Zip _____ Type of Business _____

Principal/Partner/Officer/Guarantor _____ Social Security No. _____ Individual
 Corp Date of Inc. _____
 Limited Partnership
 Limited Liability
 Home Street Address _____
 City/State/Zip _____ Phone No. _____ Tax Exempt
 Please attach copy of certificate

EQUIPMENT INFORMATION

Dealer Name _____ Contact (salesman) _____ Dealer Phc _____ Dealer Fax# _____
 Dealer Address _____

* If this is for a Manufacturer special rate program, list manufacturer name-

Finance Fair Market Value Purchase Option
 Product Fixed Purchase Option \$ _____ or _____ %
 Dealer Guaranty of Purchase Option
 Conditional Sales Contract

Interest rate % _____ # Advance _____
 Equipment Description (Manufacturer, Model, S/N) _____
 1 New Used Year: _____
 2 New Used Year: _____
 3 New Used Year: _____

Sale Price (or attach sales quote to this page) _____
 Sales Tax (if included in financing) _____
 Downpayment or Trade (Minus) _____
 Total Amount to Finance _____
 Payment Amount _____

BANK REFERENCES

Bank/Credit Reference Name _____ Account/Loan Officer _____ Phone# _____ Fax# _____
 Address (City, State) _____ Checking/ Loan Acct. No. _____

Bank/Credit Reference Name _____ Account/Loan Officer _____ Phone# _____ Fax# _____
 Address (City, State) _____ Checking/ Loan Acct. No. _____

TRADE REFERENCES

Trade References _____ Contact _____ Phone# _____ Fax# _____

Address (Street, City, State) _____ Account# _____
 Trade References _____ Contact _____ Phone# _____ Fax# _____
 Address (Street, City, State) _____ Account# _____

BUSINESS PURPOSE AUTHORIZATION You, the credit applicant, certify to us that you are applying for credit for a business purpose, and not for personal, family or household purposes.

I hereby authorize ASV Capital to obtain further information concerning my personal credit standing from any credit bureau, the references herein listed, or any other person. A photostatic copy of this authorization shall be as valid as the original.

X _____
 Print Name & Title _____ Date _____ Signature _____

Authorization to Obtain and
Release Consumer Credit Information



To: ASV Capital

Re: Financing

In connection with the above referenced financing, each of the undersigned hereby authorizes ASV Capital to make all inquiries it deems necessary to verify the accuracy of information provided by the undersigned and/or to determine the undersigned's credit worthiness including, without limitation, obtaining consumer and/or business credit reports regarding the undersigned. Each of the undersigned hereby acknowledges that ASV Capital will obtain a consumer credit report concerning them.

Dated: _____

Name & Social Security #

Name & Social Security #

Street

Street

City & State

City & State

Signature

Signature

Name & Social Security #

Street

City & State

Signature