

CNH CAPITAL COMMERCIAL REVOLVING ACCOUNT APPLICATION – U.S.

USAGE: AGRICULTURE MERCHANT NAME AND CITY _____
 CONSTRUCTION MERCHANT # _____

Credit Line Requested: _____

(PLEASE PRINT CLEARLY and COMPLETE APPLICABLE SECTIONS ONLY)

SECTION 1 TO BE COMPLETED BY: CORPORATION LLC PARTNERSHIP MUNI / GOV'T

BUSINESS / PARTNERSHIP NAME * _____ TAX ID # * _____

STREET # AND NAME OR RURAL ROUTE # * _____ CITY * _____ STATE * _____ ZIP * _____

ALTERNATE MAILING ADDRESS _____ BUSINESS TELEPHONE * _____ YR. BUS. EST. * _____ ANNUAL INCOME _____ E-MAIL ADDRESS _____

(OFFICER OR PARTNER) FIRST NAME _____ MI _____ LAST NAME _____ SOCIAL SECURITY # _____ DATE OF BIRTH _____

HOME TELEPHONE _____ BUSINESS TELEPHONE _____ E-MAIL ADDRESS _____

SECTION 2 TO BE COMPLETED BY: SOLE PROPRIETOR CO-APPLICANT

FIRST NAME * _____ MI _____ LAST NAME * _____ DBA _____ SOCIAL SECURITY # * _____

DATE OF BIRTH * _____ STREET # AND NAME OR RURAL ROUTE # * _____ CITY * _____ STATE * _____ ZIP * _____

ALTERNATE MAILING ADDRESS _____ HOME TELEPHONE * _____ BUSINESS TELEPHONE _____

E-MAIL ADDRESS _____ YR. BUSINESS EST. * _____ RESIDENCE OWN RENT _____ YR RES. EST * _____ ANNUAL INCOME _____ OCCUPATION _____

CO-APPLICANT - FIRST NAME _____ MI _____ LAST NAME _____ DBA _____ SOCIAL SECURITY # _____

DATE OF BIRTH _____ STREET # AND NAME OR RURAL ROUTE # _____ CITY _____ STATE _____ ZIP _____

ALTERNATE MAILING ADDRESS _____ HOME TELEPHONE _____ BUSINESS TELEPHONE _____

E-MAIL ADDRESS _____ YR. BUSINESS EST. _____ RESIDENCE OWN RENT _____ YR RES. EST _____ ANNUAL INCOME _____ OCCUPATION _____

SECTION 3 (TO BE COMPLETED BY ALL APPLICANTS)

DEPOSITORY BANK NAME _____ BANK TELEPHONE _____ CONTACT NAME _____ ACCOUNT # _____ TOTAL CHECKING & SAVINGS BALANCE _____

LENDER NAME _____ LENDER TELEPHONE _____ CONTACT NAME _____ ACCOUNT # _____ TOTAL LOAN BALANCE _____

SECTION 4 (PLEASE PROVIDE THE NAMES OF ANY SECONDARY AUTHORIZED USERS)

FIRST NAME _____ MI _____ LAST NAME _____ FIRST NAME _____ MI _____ LAST NAME _____

1 _____ 2 _____

(PLEASE READ AND SIGN BELOW)

By signing below, the applicant, partner or co-applicant ("Applicant") hereby (1) requests that CNH Capital America LLC ("Lender") establish a CNH Capital Commercial Revolving Account (the "Account") and to issue to Applicant one or more cards (if card(s) are issued to access the Account) to be used in connection with said Account; (2) authorizes Lender to investigate Applicant's credit worthiness, including without limitation by obtaining reports from credit reporting agencies and other information and credit records, and to share such information and information regarding the Applicant or the Account or Lender's credit experience with Applicant, with credit reporting agencies, other creditors of Applicant, the merchant, third parties that Lender reasonably believes are conducting or will conduct credit inquiries in accordance with applicable law, and subsidiaries and affiliates of Lender, and to use the aforementioned information in collecting any debt of Applicant owed to Lender; (3) authorizes Applicant's past and present lenders, lessors, landlords and other creditors to provide Lender or its designees with any and all information that will assist Lender in the credit inquiry; and (4) certifies that all information provided in this application is true and correct. This application is given for the purpose of obtaining credit. Applicant agrees that, if an Account is opened in response to this application, (i) the Account and the card(s) (if card(s) are issued to access the account) shall be governed by the terms and conditions of the agreement establishing the Account, as it may be amended from time to time; (ii) Applicant shall be responsible for all charges, advances and fees made or incurred under the Account by Applicant or anyone authorized or permitted by Applicant to use the Account and/or the card(s) (if card(s) are issued to access the Account); and (iii) the Account shall be used only for agricultural, commercial or governmental purposes, and not for personal, family or household purposes. You further certify that you are authorized to sign on behalf of the Applicant. The person(s) signing below also agree, individually and not on behalf of Applicant, that Lender or its designees may obtain credit reports on said person(s) from credit reporting agencies, and otherwise investigate the credit of said person(s), in connection with Lender's credit inquiry with respect to Applicant, and hereby instructs all credit reporting agencies to provide Lender with such credit reports upon request.

Notice to Ohio residents – The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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 Illinois residents – (a) No applicant may be denied a credit card on account of race, color, religion, national origin, ancestry, age (between 18 and 70), sex, marital status, physical or mental handicap unrelated to the ability to pay or unfavorable discharge from military service, (b) The applicant may request the reason for rejection of his or her application for a credit card, (c) No person need reply for a credit card solely because of a change in marital status unless the change in marital status has caused a deterioration in the person's financial position, and (d) A person may hold a credit card in any name permitted by law that he or she regularly uses and is generally known by so long as no fraud is intended thereby.

Notice to California residents – An applicant, if married, may apply for a separate account.

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 section of this application.

APPLICANT'S SIGNATURE (REQUIRED) _____ PRINT NAME _____ TITLE _____ DATE _____ PARTNER OR CO-APPLICANT'S SIGNATURE _____ PRINT NAME _____ TITLE _____ DATE _____

X _____ X _____

PERSONAL GUARANTY: (Corporations or LLCs in business less than 2 years, and all partnerships and proprietorships. Guarantor must be owner/sole proprietor, general partner, or corporate officer)

If an Account is opened in response to the foregoing application, in consideration of Lender granting Applicant the Account, the undersigned Guarantor hereby unconditionally, absolutely and irrevocably guarantees the prompt and full payment and performance of all of Applicant's obligations under the agreement establishing the Account (the "Agreement"), and further agrees, in the event of any default under the Agreement, to pay the total balance due on the Account upon demand, without requiring Lender or its assignees to make demand and/or proceed first to enforce the Agreement against the Applicant. This Guarantor hereby waives notice of any modifications, amendments, or extensions of the Agreement, and of Applicant's non-performance or breach of the Agreement. The payments obligations of the Guarantor are the direct, primary, and continuing obligations of the Guarantor and Guarantor's heirs, successors and assigns, and not merely a guaranty of collection. By signing below the Guarantor also agrees, individually and not on behalf of Applicant, that Lender or its designees may obtain credit reports on said Guarantor from credit reporting agencies, and otherwise investigate the credit of said Guarantor, and hereby instructs all credit reporting agencies to provide Lender with such credit reports upon request.

GUARANTOR SIGNATURE _____ FIRST NAME _____ LAST NAME _____ STREET # AND NAME OR RURAL ROUTE # _____

X _____ CITY _____ STATE _____ ZIP _____ SOCIAL SECURITY # _____

MERCHANT USE ONLY IF APPROVED BY PHONE, MAIL THE ORIGINAL APPLICATION TO: CNH CAPITAL COMMERCIAL REVOLVING ACCOUNT, P.O. BOX 1063, EVANSVILLE, IN 47706-1063

ACCOUNT NUMBER _____ CREDIT LIMIT _____ PRE-QUALIFICATION ID # _____