Bingham Equipment Company
Bingham Auto & Truck Parts
Bobcat of Phoenix

(480) 969-5516
(480) 969-0271 Fax

ACCOUNT CREDIT APPLICATION AND CONTRACT
(Please Type or Print)

Store Location:	Date:
Acct No:	Credit Amt. Requested:

PERSONAL INFORMATION

APPLICANT'S NAME (LAST,FIRST,MIDDLE INITIAL)	SOCIAL SECURITY NO.	DATE OF BIRTH

RESIDENCE ADDRESS (STREET, CITY, STATE)	ZIP CODE	COUNTY	OWN OR RENT?	YRS AT THIS ADDRESS?

E-MAIL ADDRESS	RESIDENCE PHONE NO.	MOBILE PHONE NO.	MONTHLY MORTGAGE PMT

PRIOR ADDRESS (IF LESS THAN 3 YEARS)	YRS AT THIS ADDRESS?

EMPLOYER NAME	EMPLOYER ADDRESS

EMPLOYER PHONE	POSITION	ANNUAL SALARY	LENGTH OF EMPLOYMENT/ YEAR RETIRED

PREVIOUS EMPLOYER (IF LESS THAN 3 YRS AT CURRENT EMPLOYER)	PREVIOUS EMPLOYER ADDRESS

EMPLOYER PHONE	POSITION	ANNUAL SALARY	LENGTH OF EMPLOYMENT

SPOUSE NAME	SPOUSE SOCIAL SECURITY NO.	SPOUSE DATE OF BIRTH

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU	ADDRESS (STREET, CITY, STATE, ZIP)	PHONE	RELATIONSHIP

BUSINESS INFORMATION

BUSINESS NAME	TYPE OF BUSINESS	YRS IN BUSINESS	FEDERAL TAX ID NO.

DBA NAME	☐ Sole Proprietorship ☐ Partnership ☐ Corporation ☐ LLC	GROSS INCOME

BILLING ADDRESS (STREET, CITY, STATE)	ZIP CODE	BUSINESS PHONE NO.	COUNTY

SHIPPING ADDRESS (STREET, CITY, STATE)	ZIP CODE	BUSINESS FAX NO.	PURCHASE ORDER REQUIRED? ☐ YES ☐ NO

E-MAIL ADDRESS

PRINCIPAL OWNERS, OFFICERS, PARTNERS, DIRECTORS, MEMBERS

	NAME	TITLE	% OWNERSHIP	SOCIAL SECURITY NO..
1	HOME ADDRESS (STREET, CITY, STATE, ZIP)			PHONE NO.
2	NAME	TITLE	% OWNERSHIP	SOCIAL SECURITY NO..
	HOME ADDRESS (STREET, CITY, STATE, ZIP)			PHONE NO.

FINANCIAL INFORMATION

BANK OR FINANCE COMPANY NAME	CONTACT	ACCOUNT NUMBER

ADDRESS (STREET, CITY, STATE, ZIP)	TELEPHONE NUMBER

1. HAVE YOU OR YOUR COMPANY EVER FILED BANKRUPTCY OR COMPROMISED A DEBT?	☐ YES	☐ NO
2. HAVE YOU OR YOUR COMPANY EVER HAD A LAWSUIT FILED AGAINST YOU?	☐ YES	☐ NO
3. DO YOU OR YOUR COMPANY HAVE ANY UNPAID TAX LIENS?	☐ YES	☐ NO
4. HAVE YOU OR YOUR COMPANY EVER HAD EQUIPMENT REPOSSESSED?	☐ YES	☐ NO
5. HAVE YOU OR YOUR COMPANY EVER BEEN FORECLOSED ON OR HAD PROCEEDINGS STARTED AGAINST YOU?	☐ YES	☐ NO
6. ARE ANY OF YOUR ACCOUNTS WITH CREDITORS NOW PAST DUE?	☐ YES	☐ NO

TERMS AND CONDITIONS

Applicant agrees to make payment in full of all debts incurred within 30 days of invoice date. Applicant also agrees to pay a 1.75% per month carrying charge (21% per annum) on balances past due as well as all collection fees, attorney's fees and court costs incurred to collect past due accounts. All agents and employees of applicant are authorized to incur debt, and charge to Applicant's account for repair parts, service, rentals and purchases of any equipment. Applicant agrees to pay a $20.00 charge for all checks returned by bank. Any form of payment may be recorded and implemented to keep account current. The undersigned applicant(s) affirm that the foregoing information is true and correct and given for the purpose of obtaining credit and understand that if credit is extended, Bingham and its assigns, including Bingham Equipment Company, Bobcat of Phoenix, Bingham Auto & Truck Parts, AGCO Finance LLC, CNH Capital, Wells Fargo Vendor Financial Services, Kubota Credit Corporation, PNC Equipment Finance, LLC, Diversified Financial, Wells Fargo Equipment Leasing and Finance, AgDirect, Alliance Funding Group, Auxilior Capital Partners (CREDITORS) and/or its affiliates or related parties, may obtain commercial and consumer credit reports, investigate references and statements, and make other credit inquires about the applicant and all such individuals, and anybody contacted in connection therewith may release any credit and financial information, will rely on such information to secure the indebtedness. References are authorized to provide relevant credit information to CREDITORS. CREDITORS are authorized to investigate and obtain reports concerning credit history of the undersigned and to release information about their credit experience with the undersigned.

Applicant Signature _____ Title _____ Date _____

Applicant Signature _____ Title _____ Date _____

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GUARANTOR CONTRACT

In consideration of extension of credit to the before named Applicant, I personally guarantee all debts incurred by the Applicant in accordance with all the terms and conditions set forth in this contract. Their terms may be rearranged, extended, shortened, and/or renewed without notice to me. I will, within five days from date of notice, pay the total amount due on Applicant's account.

1st Guarantor Signature _____ Social Security No. _____ Date _____

Printed Name _____ Residence Phone Number _____

2nd Guarantor Signature _____ Social Security No. _____ Date _____

Printed Name _____ Residence Phone Number _____

I also submit my VISA or MASTERCARD number with expiration date and agree to keep it current in the event it may be required to use for payment of my account.

1st Guarantor
VISA or MASTERCARD No. _____ Expiration Date _____

2nd Guarantor
VISA or MASTERCARD No. _____ Expiration Date _____

PRINCIPAL(S), PROPRIETOR(S) AND/OR GUARANTOR(S) AUTHORIZATION TO USE PERSONAL CREDIT REPORTS

The undersigned hereby consent(s) to CREDITORS' use of a non-business consumer credit report on the undersigned in order to further evaluate the credit worthiness of the undersigned as principal(s), proprietor(s) and/or guarantor(s) in connection with the extension of business credit as contemplated by this credit application. The undersigned hereby authorize(s) CREDITORS' to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the business credit represented by this credit application. The undersigned as [an] individual(s) hereby knowingly consent to the use of such credit report consistent with the Federal Fair Credit Reporting Act as contained in 15 U.S.C. @ 1681 et seq..

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____