



Dealership Name: Rowand Machinery Company

Location: Spokane, WA

Date:

Applying for: [] Retail Note [] Lease [] PowerPlan [] Municipal

Fields marked with an asterisk (*) are required by law (USA PATRIOT Act) when applying for revolving credit. Your application cannot be processed without this information.

APPLICANT INFORMATION — Full legal name and address of Business — Corporation, Partnership, Trust, Sole Proprietorship or Municipality

Business Name*, DBA (if any), Federal Tax ID Number*, Physical Address*, City*, County*, State*, Zip*, Mailing Address (if different than the above), Business Phone #, Fax #, E-mail Address, State in which the Business is Registered or Incorporated*, Date Business Incorporated, Partnership Formed, or Sole Proprietorship Started, Time at current address

Primary Applicant Information – Personal, Officer, Partner, Member or Municipal Contact Information († Required if Individual)

First Name*, Middle*, Last Name*, Title, DOB †, Social Security # †, Physical Address of Primary Officer, Partner, Owner or Member (If different than above), Home Phone #, Mobile Phone #, E-mail Address, Are you a U.S. Citizen? YES [] NO []

Type of Business*: [] Individual [] Sole Proprietor [] S Corp [] C Corp [] Municipality [] LLC^ [] Limited Partnership^ [] General Partnership^ [] Trust^

Additional Owner(s), Partner, Member(s), and/or Officer(s) Information - Use a separate sheet listing name(s), title(s), % owned, address(es), phone #(s), SS#(s), and date(s) of birth

CO-APPLICANT INFORMATION

First Name*, Middle*, Last Name*, Title, DOB*, Social Security #*, Physical Address*, City*, County*, State*, Zip*, Phone #, Fax #, E-mail Address, Are you a U.S. Citizen? YES [] NO []

FINANCIAL INFORMATION AND BANK/LOAN REFERENCES NOTE: <*> indicates required information

Please submit the two most recent years of accountant-prepared corporate and/or personal financial statements and work in progress (jobs on hand) report with this application. <*> Annual Gross Sales, Net Income, Net Worth, Bank Name, ACCT #, Phone #, Contact Name, Equipment Finance Co., ACCT #, Phone #, Contact Name

Years in Business, Ever filed Bankruptcy? YES [] NO [], Has a judgment ever been filed against you? YES [] NO []

INSURANCE INFORMATION NOTE: not applicable to revolving credit

Insurance Agency Name, Contact Name, Policy #, Phone #, Fax #, Physical Address, City, County, State, Zip

If you do not have insurance, would you like to have JD Sentry UltraGard Physical Damage Insurance quoted and applied to your payments? Yes [] No []

Notice to Applicant: You represent that the information given in the entire application, including all applicant names and any other information provided in this credit application is (1) true, correct and complete, and (2) provided for the purpose of obtaining credit in an amount set forth in the credit policies and practices of FPC Financial, f.s.b. (FPC), Deere Credit, Inc. (DCI) or John Deere Construction and Forestry Company (JDCFC) (collectively referred to as "we," "us" and "our.")

You understand that any decision to grant or deny an installment or lease application will be made by DCI or JDCFC in Iowa. You understand that any decision to grant or deny revolving credit will be made by FPC in Wisconsin. You understand that this application may be used for obtaining credit or lease approval for any DCI or JDCFC product.

*** This Credit Application consists of two (2) pages. Notice to Applicant is continued on the next page. ***

PRIMARY APPLICANT By: [X] Individually [] If primary applicant is a corporation or other form of legal entity, title of signer: Printed Name of Signer: Date:

CO-APPLICANT By: [X] Individually [] If primary applicant is a corporation or other form of legal entity, title of signer: Printed Name of Signer: Date:

