



37915

# EXMARK BUSINESS ACCOUNT APPLICATION

ER/EC  
EXM

## SECTION 1 Describe Your Business

Type of Business:  C-Corp  S-Corp  Government  Sole Proprietor  Partnership  Nonprofit

Gross Annual Sales/Revenues:  Less Than \$50,000  \$50,000 - \$100,000  \$100,001 - \$250,000  \$250,001 - \$500,000  \$500,001 - \$3,000,000  \$3,000,001 +

In Business Since: \_\_\_\_\_ # of Employees: \_\_\_\_\_ Credit Line Requested: \_\_\_\_\_ Subject to underwriting criteria: \_\_\_\_\_ Authorized Account User #1: \_\_\_\_\_

Does your business have more than \$3 million in annual sales/revenue --OR-- is it a Nonprofit organization existing more than 10 years?  
 If YES, complete Section 2.  If NO, complete Section 2 and 3.

Authorized Account User #2: \_\_\_\_\_

## SECTION 2 Business Details

Your Company's Full Legal Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Account Contact Person: \_\_\_\_\_

Street Address (No P.O. Box): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Tax ID Number: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

If the line requested is \$25,000 or less, please mail the application to GE Money Bank, P.O. Box 6150, Rapid City, South Dakota 57709.

If the line requested is more than \$25,000, be sure to include 2 years business financial statements (if applicable) and a completed Borrowing Resolution. Include interim statements if most recent is more than six (6) months old. Applicant agrees to provide other financial information if GE Money Bank deems necessary.

### TRADE REFERENCE

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### BANK REFERENCE

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Bank Officer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

### Signature of Company's Authorized Representative

By signing below on behalf of your business, you represent that your business is a valid business entity; that all purchases made on this Account, if approved, will be for purposes other than personal, family, or household use; and that you are an authorized representative of the business with authority to enter into contractual agreements. On behalf of the business, you certify that all information provided in the Application is complete and accurate, you agree to be bound by the terms of the governing credit agreement, and you authorize us to obtain information about you personally (whether or not you have personally guaranteed the Account) and your business from credit reporting agencies and other sources we deem appropriate in considering this Application and subsequently for purposes of updates, renewals, or extensions of credit granted as a result of this Application or in reviewing or collecting the Account. You also understand that credit on this account, once approved, will be extended by GE Money Bank ("GEMB"), and that there is no binding contract between us until GEMB approves and accepts this Agreement. The undersigned acknowledges receipt of a copy of the GEMB Business Revolving Credit Account Agreement.

Federal law requires us to obtain, verify, and record information that identifies you when you open an account. We will use your name, address, date of birth, taxpayer identification number and other information for this purpose. If a PO box is provided in section 2, we will need a personal guarantor as a contact person.

Signature:  \_\_\_\_\_  
 Signer must be an officer, owner, or agent of business or entity and must be authorized to enter into contracts on behalf of business or entity.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

## SECTION 3 Personal Guaranty

First Name: \_\_\_\_\_ M. Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Street Address (No P.O. Box): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(One) Do You:  Own  Rent  Parents/Relative  Other

Home Phone: \_\_\_\_\_ Your % of Ownership: \_\_\_\_\_ %

Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Month Day Year

Social Security Number: \_\_\_\_\_

Annual Income:  Less Than \$50,000  \$50,000 - \$75,000  \$75,001 - \$100,000  \$100,001 +

E-Mail Address By providing an E-mail address, I consent to receive E-mail communications about my Account and authorize you to provide my E-mail address to Exmark so that I may receive such communications, offers and updates.  
 \*NOTE: Alimony, child support or separate maintenance payments need not be disclosed unless you wish to have it considered as a basis for repaying this obligation.

### Sign Here for Personal Guaranty

**PERSONAL GUARANTY:** In consideration of GE Money Bank ("GEMB") financing purchases by buyer, the undersigned guarantor hereby agrees to unconditionally, absolutely and irrevocably personally guarantee payment of all amounts due under, and the performance under the terms of, the GEMB Business Revolving Credit Account Agreement, and further agrees to pay the total balance due on the account opened pursuant to the Agreement upon demand, without requiring GEMB to proceed first to enforce payment against the buyer also liable on this account, in the event of any default under the Agreement that governs the account. The undersigned hereby waives any notices regarding the Agreement or this guaranty, and agrees that this guaranty shall be applicable until the Agreement has terminated and all amounts due thereunder shall have been paid in full. The undersigned guarantor agrees that GEMB may report the undersigned's liability for and the status of the account to credit bureaus and others who may lawfully receive such information. The undersigned guarantor agrees that personal credit history of the undersigned guarantor may be used in making credit decisions and consumer reports on the undersigned guarantor may be obtained from time to time. Direct inquiries of employers and businesses where the undersigned guarantor maintains accounts may also be made.

Signature of Guarantor \_\_\_\_\_ Date: \_\_\_\_\_

### Store use Only

Guarantor's Primary ID (Type, Num., Issuing State) Exp. / Sec. ID (Credit Type and Issuer) Exp. \_\_\_\_\_

Authorized Representative ID (Type and Number) Expires \_\_\_\_\_

5 3 4 8 1 2

Store # \_\_\_\_\_

Contact Name \_\_\_\_\_

Account Number \_\_\_\_\_

Store Fax Number \_\_\_\_\_

Store Phone Number \_\_\_\_\_

Exclusively for Equipment, Parts and Service!

To find out about changes in the terms of the attached agreement, write to us at GEMB, P.O. Box 6160, Rapid City, SD 57709-6160



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