

MUNICIPAL FUNDING PROGRAM

Return completed application with required financial information

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Legal Name of Obligor:	Fed. Tax ID #:						
Address:		T					
City:		County:		State:	Zip:		
Contact Person:			Title:				
Phone: ()			Fax: ()				
Email Address:			Alt Contact Email Address:				
Alternative Contact Person:			Title: Phone: ()				
Date municipal entity was established:			Does the obligor self-insure for property & liability insurance?				
Total Cost of Equipment/Project: \$			Term (years):				
*Down Payment: \$			Source of Down Payment:				
Trade In: \$			Payment Amount: \$ Delivery Date:				e:
Other: \$			Payment Due:		Advance	Arrears	
Amount to Finance: \$			Payments:	Monthly	Quarterly	Semi-Annual	Annual
*Obligor's down payment should be made before	payment is required price	or to payment of ar	ny contract proceeds, unl	ess otherwise neg	otiated.		
Has the obligor paid, or does obligor intend to pay, a vendor for any portion of the equipment being financed with the intent of being reimbursed with proceeds from this financing? Yes No							
How will the contract payments be made? P-Card *Addt'l Fees Will Apply* Check ACH Other (specify)							
What fund will the remaining contract payments be made from? General Special (specify)							
Will any federal monies be applied to the contract payments? Yes No If yes, explain.							
Equipment Description:							
New Equipment: Yes No If no, list age of equi					ate manufactured:		
Refurbished:	Yes	No	Year:				
Replacement:	Yes	No	Age of current equipment: Year purchased:				
If not a replacement, why is the equipment needed?							
Buyout Included:	Yes	No	Amount of buyout included: \$				
Soft Costs Included:	Yes	No	Amount of soft costs included (shipping, software, and sales tax): \$				
Physical location of equipment after delivery:							
Describe the essential use of the equipment:							
Has the obligor ever defaulted or no	e, bond, or legal ob	ligation?	Yes	١	No		
Will the obligor issue more than \$10	ebt in this calendar	year?	Yes	1	No		
Is the project a building?	Yes	No	If yes, who owns t	he land?			
What is the physical address of the	new building	/project?					
Financial Information Required							
• Two (2) most recently co	ompleted	audits					
• If the fiscal year end of the audit is more than three (3) months ago, also provide current year-							
to-date Balance Sheet with Debt Service Commitments and Income Statement							
 For any unaudited fisca 	l year pro	ovide con	nprehensive	financial s	tatements to	include a	
Balance Sheet with Debt Service Commitments and an Income Statement in place of the audits							
Without complete financial information, the credit review process may be delayed. Please call if you have any questions or concerns prior to returning this application.							
Completed By (signature):			Printed Name and Title:				Date:

BILL MAPES Contact: **BOB AISTRUP**

Additional financial information may be requested if deemed necessary during credit review.

[—]Auditional mianical microhaution may be requested in deember diseasing young uterior review.

—By signing this application Obligor representative agrees to the following statement: "Everything stated in this application is correct to the best of my knowledge. I understand Obligee will retain this application whether or not it is approved. Oblige is authorized to verify any information on this application with an appropriate third party as necessary to complete the credit review process."

—Please note that, depending on circumstances, we reserve the right to charge a reasonable fee to Obligor/box, if this transaction is not funded. This fee is for expenses incurred and services performed related to the processing of the transaction. This fee will NOT be charged if the transaction is funded by Obligee.