



Finance Credit Application

Sales Rep: _____ Phone: _____

Email: _____ Fax: _____

READ CAREFULLY BEFORE SUBMITTING THIS APPLICATION: We recommend that you print the Application, sign it below and email or fax it to us at the address/number set forth at the top of this application. If you send this Application by unencrypted and non-secure e-mail, the contents, including non-public information, may be at risk, and we are not responsible for the security of the contents or for any theft or loss of data during e-mail transmission. Your electronic signature on this Application and any related documents shall be unconditionally valid and legally enforceable, and you agree not to contest the validity or enforceability of any electronic signature (or the authority of the electronic signer to sign).

Company Information

Legal Name of Lessee (Municipality)			
Street Address		City	State/Zip
Phone #	Fax #	Website	Federal I.D. #

Person(s) to Contact for Clarification Regarding Project

Contact Name & Title	Contact Email Address	Phone #
Contact Name & Title	Contact Email Address	Phone #

Obligations / Economics

Are the Applicant's obligations bank qualified (i.e., expected to issue less than \$10 Million in tax-exempt financing this calendar year)?
 Bank Qualified Non-Bank Qualified

Please list the Applicant's current underlying bond rating from the rating agencies listed below (if applicable)
 Moody's Investors Service _____ Standard & Poor's _____ Fitch _____

Discuss the Applicant's economic trends (stable, positive, negative) and reasons for any variations

Has the Applicant ever defaulted or non-appropriated an obligation?
 Yes No If Yes, please explain: _____

Demographic Information

Please provide the following demographic information (please attach any applicable demographic statistics)	Cities, Towns and Counties:	Approx. Square Miles	Population	Increasing or Decreasing Population? Why?
Educational Applicants Only (please also answer the above question regarding the resident city):	Enrollment	Increasing or Decreasing Enrollment? Why?		
How many schools make up the district? please list the number and type of each school)	Elementary	Middle	High School	Other

Essential Use Form

Purchase Description (please be specific and attach any applicable equipment lists or invoices available)		Estimated Equipment Delivery Date
Are any of the Lease Proceeds for reimbursement of prior purchase? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, has a Reimbursement Resolution been approved by the Governing Body? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the Equipment replacing existing equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please state how long you have currently used the Equipment and the reason you are replacing the Equipment	
What will the Applicant do with the old equipment that is being replaced?	If No, please state the reason additional equipment is needed:	
Please describe in detail the following:		
What will the Equipment be used for?		
Describe the essential nature of the equipment financed:		
List the specific department that will be the primary user of the Equipment:		



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Lease Payments

Will the lease payments be made from Applicant's General fund? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, from which Special Fund will the lease payments be made? _____
Will any federal grant of loan monies be used? If so, please describe <input type="checkbox"/> Yes <input type="checkbox"/> No _____	
Has the first payment been appropriated? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Terms and Conditions

Total Cost of Equipment	Advance Payment	Amount to Finance
Term (in years)	Frequency (choose one) <input type="checkbox"/> Annual <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly	
Remittance (choose one) <input type="checkbox"/> Advance <input type="checkbox"/> Arrears	Equipment Delivery Date	
Insurance Company Name or Indicate Self Insured	Amount of Liability Insurance	Amount of Property Damage Insurance

By submitting this Application, the undersigned warrants that the applicant and each individual listed as a principal, partner, owner, guarantor or obligor consent, authorize and warrant as follows: The Huntington National Bank and its agents ("HNB") may (a) obtain commercial and consumer credit reports, investigate references and statements, and make other credit inquiries about the applicant and all such individuals, and anybody contacted in connection therewith may release any credit and financial information; (b) HNB and its affiliates may share with one another financial, credit and other information about the applicant and such individuals and use shared information to market to the applicant and the individuals; (c) the information on or accompanying this Application is true and complete, and the undersigned will notify HNB of any material change in any information; (d) this Application is submitted in connection with financing solely for business and commercial purposes and NOT for personal, family or household purposes; (e) the applicant, if an individual, is a citizen or lawful permanent resident of the United States; and (f) this Application will apply to any future request for additional financing and all notices, disclosures, consents and warranties shall be deemed repeated for each future request, unless the applicant submits a new written application. HNB does not make offers or commitments to extend credit except in final signed documents and, in limited circumstances, in and pursuant to the terms and conditions of written commitment letters. Term sheets, proposal letters, approval letters and the like are not commitment letters.

Signature/Title

Date

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT. To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

EQUAL CREDIT OPPORTUNITY ACT. If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact our Customer Service Manager, 1405 Xenium Lane N (PCC180), Plymouth MN 55441 (866-311-2755) within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. **NOTICE:** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006.

Please retain a copy of this notice and application for your records. Updated 10/2021 · Municipal-Long