

PLEASE



To Process your Application we must have the following:

- Complete and return the entire application.
- An Owner/Principle/Officer must sign.
- Please include a copy of Photo ID for the parties signing to prevent identity theft.

For information on the Federal Requirement to fight identity theft go to:
http://www.redflagrules.net/General_Requirements.html

Failure to provide this information may delay or prevent us from processing your application. Please email completed credit applications to creditapplications@wyomingcat.com. For questions or concerns please contact a Wyoming Machinery Company Credit Department employee.

Carol Mayfield
Credit Analyst
Phone: 307.472.1000 ext. 1153
Fax: 307.261.4486
CMayfield@wyomingcat.com

Jessica Johnson
Credit Analyst
Phone: 307.472.1000 ext. 1130
Fax: 307.261.4486
jaohnson@wyomingcat.com

Nichole Pace
Credit Analyst II
Phone: 307.472.1000 ext. 1139
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NCpace@wyomingcat.com

Brett Morss
Credit Manager
Phone: 307.472.1000 ext. 1159
Fax: 307.261.4486
BRMorss@wyomingcat.com



Serving Wyoming through Casper, Cheyenne, Gillette, & Rock Springs

Online Credit Application for WMC Account

To apply for credit with Wyoming Machinery Company, please fill out this application entirely. Altering this application may result in your application being denied.

Please ensure to attach a copy of your photo ID, or a notarized Affidavit of Identification to this application. You can do so at the very bottom of this form.

Salesman: _____

General Information:

Applicant Name: _____ Trade Name (dba): _____ Federal ID: _____

Physical Address: _____ City: _____ State: _____ Zip Code: _____

Billing Address: _____ City: _____ State: _____ Zip Code: _____

Contact Name: _____ Title: _____ Business Phone: _____

Cell Phone: _____ Fax: _____ Email: _____

Description of Business: _____ Business Start Date: _____ Sole Proprietorship Corporation LLC

PO's Required?: Yes No State of Incorporation: _____ Outstanding Liens/Judgements?: _____

Has the Business or Principal ever declared Bankruptcy?: Yes No Sales Tax Exempt?: Yes No
If so, what was the filing date?: _____ If yes, please attach copy of exemption

Bonding Company: _____ Insurance Company: _____

Contact Name: _____ Phone Number: _____ Email: _____

Contact Name: _____ Phone Number: _____ Email: _____

A/P Name: _____ Phone Number: _____ Email: _____

Parts & Service: _____ Phone Number: _____ Email: _____

Sales & Rentals: _____ Phone Number: _____ Email: _____

Account will be used for: Parts Service Rentals Sales Credit Limit Requested: _____ Website: _____

Financial Information: Bank/Finance Company Reference

Please provide account numbers:

1.) Financial Institution: _____ Checking: _____ Savings: _____

Contact Name: _____ Phone Number: _____ Email: _____

2.) Financial Institution: _____ Checking: _____ Savings: _____

Contact Name: _____ Phone Number: _____ Email: _____

Trade References:

1.) Contact Name: _____ Phone Number: _____ Email: _____

Address: _____ City: _____ State: _____ Zip Code: _____

2.) Contact Name: _____ Phone Number: _____ Email: _____

Address: _____ City: _____ State: _____ Zip Code: _____

3.) Contact Name: _____ Phone Number: _____ Email: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Personal Information on Owner/Principal/Guarantor:

Per Federal Regulation (FACTA), a copy of a valid photo ID must be provided by all applicants signing the application.

Name: _____ Title: _____ Date of Birth: _____ SSN: _____

Phone Number: _____ Email: _____ % Ownership: _____ Time as current owner: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Net worth: _____ Annual Income: _____ Monthly Housing Payment: _____

Name: _____ Title: _____ Date of Birth: _____ SSN: _____

Phone Number: _____ Email: _____ % Ownership: _____ Time as current owner: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Net worth: _____ Annual Income: _____ Monthly Housing Payment: _____

Signature of Owner/Principal or Authorized Officer/Partner

Notice: Applicant and each other person signing below warrants that the information provided herein or in connection with this application is true and correct and authorizes the release of such information to any such party who may provide credit to applicant, whether herein or pursuant to a subsequent application or request, to obtain from banks, credit bureaus and other creditors, all of which are hereby authorized to release, and credit/financial information concerning applicant or such other person (including personal credit bureaus) as such party may deem appropriate, and to share all such information with the other. Applicant's signature warrants the ability and willingness to pay invoices in accordance with Wyoming Machinery Company's standard terms as listed on credit application, which is hereby incorporated.

BY: _____ Title: _____ Date: _____

BY: _____ Title: _____ Date: _____

Notice: If you application for business credit is denied, you have the right to a written statement of the specific reason for the denial. To obtain the statement, please contact Wyoming Machinery Company at 307.472.1000 or financing company within sixty (60) days from the date you are notified of our decision. We will send you a written statement of the reason for the denial within thirty (30) days from receiving your request. 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 the Lender is the FTC Regional Office for the region in which the Lender operates or the Federal Trade Commission, Equal Credit Opportunity, Washington, DC.

Terms:

Open Parts & Service Accounts: NET30 from the date of invoice.

Rental: The first month's rent in advance and thereafter in advance for each succeeding month

Sales: Net Cash due 10 days from invoice date.

Contract Accounts: Net Cash due on maturity date of each installment.

General: Any account not paid in full by the 25th of the following month of purchase will be past due and a financial charge will be computed by a single periodic rate of 1.5% per month which is an APR of 18.000%. It is agreed that on any account placed in the hands of an attorney for collection of, if collected through suit, probate, or bankruptcy proceedings, there will be paid in addition to all other charges by Customer, a reasonable attorneys fee and court costs incurred in collecting said account. Customer understand and agrees that the extension of any account accommodations under this application may be terminated at any time for any reason whatsoever by Wyoming Machinery Company in its sole discretion. Such reasons may not necessarily relate to the financial or creditworthiness of the customer.

Applicant understand and agrees the payments history under this application may or may not be reported to any or all reporting entities at any time for any reason whatsoever at the sole discretion of Wyoming Machinery Company.

Applicant agrees that in the even it shall fail in the payment of any amount hereunder when due or shall fail to perform any of its obligations hereunder, or bankruptcy, receivership, assignment for the benefit of creditors or other insolvency proceedings are commenced by or against Applicant, then Applicant shall be responsible for the costs of enforcement or collection, including, but not limited to, attorney's fees and collection costs. This application is made to be performed in Natrona Count, Wyoming, any liability hereunder arises at and all sums due hereunder shall be paid at Wyoming Machinery Company's principal place of business in Casper, Wyoming. Venue of any action under this agreement shall be brought in Natrona County, in the State of Wyoming, unless Wyoming Machinery Company otherwise elects. The parties agree that the internal laws of the State of Wyoming shall control this Application and its performance. All terms and conditions of their Application shall be binding upon and shall inure to the benefit of the respective parties and their heirs, successors in interest, personal and/or legal representatives and assigns. A copy of this Application is as effective as the original.

All owners must sign the personal guaranty:

Personal Guaranty:

I / We, _____, ("Guarantor"), as more specifically identified on previous page, in consideration of the extension of credit to Applicant, unconditionally guarantees and promises the full and prompt payment for any obligation incurred by Applicant to Wyoming Machinery Company in collecting the obligation hereunder or enforcing this guaranty. The Guarantor agrees to be bound by the terms and conditions set forth in this application. The Guarantor agrees any and all liability shall in no way be affected or impaired, nor shall Guarantor be discharged, in whole or in part, by the death, incompetency, insolvency, bankruptcy, liquidation, dissolution, or withdrawal of any other Guarantor, before preceding to enforce this guaranty or as a condition to payment or performance by Guarantor on this document. The undersigned waive demand, notice of dishonor, presentment for payment, diligence in collection, acceptance of this guaranty, and notice of any fact that might materially increase the risk of the Guarantor on this document. The guaranty shall be binding on the undersigned, and on the heirs, legal representatives, successors, and assigns of the undersigned, and of each of them, and shall inure to the benefit of Lender, its successors and assigns.

Signature: _____

Date: _____

Signature: _____

Date: _____

Internal Only: ID has been compared to the application.

Initials: _____

AFFIDAVIT

STATE OF: _____

COUNTY OF: _____

On this ____ day of _____, 20____, before me _____,
notary personally appeared _____, who is personally known to me and is the
person who signed the Wyoming Machinery Company Credit Application for a credit account
with Wyoming Machinery Company dated _____, 20____. I also attest that
_____ is the _____ for _____.

Witness my hand and official seal:

PLACE
SEAL
HERE

Signature of Notary

Date



DATA GOVERNANCE CONSENT FORM

The Data Governance Statement attached as Appendix A describes Caterpillar’s practices for collecting, sharing and using data and information relating to machines, products or other assets and their associated worksites—for example to enable Cat® Connect and other digital offerings. Please review the Caterpillar Data Governance Statement (also available at www.cat.com/data_governance_statement) regularly and with care. If Caterpillar updates the Caterpillar Data Governance Statement, Caterpillar may notify you as indicated in the Data Governance Statement.

I acknowledge and agree:

- That I have read, understand and consent to this Data Governance Consent Form and Caterpillar’s Data Governance Statement;
- That I hereby grant to Caterpillar and its affiliates (as defined in the Data Governance Statement), and each of their respective licensors, service providers, suppliers, subcontractors and distributors, a non-exclusive, worldwide, perpetual, paid-up, right and license, including the right to grant and authorize sublicenses through multiple levels, to access, use, process, manipulate, modify, compile with other data or works and/or create derivative works of, in accordance with the Data Governance Statement, any and all information that is collected, transmitted or further processed in accordance with the Data Governance Statement, and that the foregoing grant is made notwithstanding any more limited rights granted in any other agreements or understandings, including in any product manuals and other documentation related to Assets (as defined in the Data Governance Statement);
- That, to the extent not prohibited by applicable law, Caterpillar may, from time to time, remotely access and program telematics or other devices installed on Assets, for any purpose including by way of example, (a) to install, or cause to be installed, updates and upgrades to software, firmware, or operating systems (for example, to enhance safety, security or improve operation of Assets) or (b) to introduce new features, and/or change the type and frequency of data transmitted through telematics devices (for example, to conduct remote troubleshooting and/or provide increased customer value); that, Caterpillar cannot guarantee that user preferences and configuration settings will be preserved following such an update, whether performed remotely or otherwise; that, to the extent not prohibited by applicable law, Caterpillar may perform such activities without further notification; and that I may withdraw my consent to the installation of updates and upgrades at any time, or make other related requests to Caterpillar, by contacting Caterpillar at CatConnectSupport@cat.com.

In the event that you transfer ownership, lease, use, or operation of any Assets, you should (i) notify the next owner, leaseholder, user or operator of such Assets of the terms of this Data Governance Consent Form and (ii) notify your dealer that you have transferred ownership, lease, use, or operation of the Assets and identify the person or entity to whom ownership, lease, use, or operation has been transferred.

By signing below I voluntary consent and agree to this Data Governance Consent Form:

Company: _____

Customer Account #: _____

Represented by (printed name): _____

Role / Title: _____

Email Address: _____

Business Phone Number: _____

Signature: _____

Date: _____

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or the data elements required on the form) to a state that would otherwise be due tax on this sale.

The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

1. Check if you are attaching the Multi-state Supplemental form.
 If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.
2. Check if this certificate is for a single purchase and enter the related invoice/purchase order # _____.

3. Please print

Name of purchaser _____

Business Address _____	City _____	State _____	Zip Code _____
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Purchaser's Tax ID Number _____	State of Issue _____	Country of Issue _____
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If no Tax ID Number	FEIN	Driver's License Number/State Issued ID Number	Foreign diplomat number
Enter one of the following: _____ _____ _____			
Name of seller from whom you are purchasing, leasing or renting _____		State of Issue: Number _____	

Seller's address _____	City _____	State _____	Zip code _____
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4. Type of business. Circle the number that describes your business

- | | |
|---|---|
| <p>01 Accommodation and food services</p> <p>02 Agricultural, forestry, fishing, hunting</p> <p>03 Construction</p> <p>04 Finance and insurance</p> <p>05 Information, publishing and communications</p> <p>06 Manufacturing</p> <p>07 Mining</p> <p>08 Real estate</p> <p>09 Rental and leasing</p> <p>10 Retail trade</p> | <p>11 Transportation and warehousing</p> <p>12 Utilities</p> <p>13 Wholesale trade</p> <p>14 Business services</p> <p>15 Professional services</p> <p>16 Education and health-care services</p> <p>17 Nonprofit organization</p> <p>18 Government</p> <p>19 Not a business</p> <p>20 Other (<i>explain</i>) _____</p> |
|---|---|

5. Reason for exemption. Circle the letter that identifies the reason for the exemption.

- | | |
|--|--|
| <p>A Federal government (<i>department</i>) _____</p> <p>B State or local government (<i>name</i>) _____</p> <p>C Tribal government (<i>name</i>) _____</p> <p>D Foreign diplomat # _____</p> <p>E Charitable organization # _____</p> <p>F Religious or educational organization # _____</p> <p>G Resale # _____</p> | <p>H Agricultural production # _____</p> <p>I Industrial production/manufacturing # _____</p> <p>J Direct pay permit # _____</p> <p>K Direct mail # _____</p> <p>L Other (<i>explain</i>) _____</p> |
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6. Sign here. *I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.*

Signature of Authorized Purchaser _____	Print Name Here _____	Title _____	Date _____
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Name of Purchaser

STATE	Reason for Exemption	Identification Number (If Required)
AR		
IA		
IN		
KS		
KY		
MI		
MN		
NC		
ND		
NE		
NJ		
NV		
OH		
OK		
RI		
SD		
TN		
UT		
VT		
WA		
WI		
WV		
WY		

SSUTA Direct Mail provisions are not in effect for Tennessee.

The following nonmember states will accept this certificate for exemption claims that are valid in their respective state. SSUTA Direct Mail provisions do not apply in these states.

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