

# TEXTRON GOLF, TURF & SPECIALTY PRODUCTS

a division of Textron Inc.

Bob-Cat • Brouwer • Bunton • Cushman • E-Z-GO • Jacobsen • Ransomes • Ryan • Steiner

## CUSTOMER INFORMATION UPDATE

Please complete and return the Customer Information Update with the document package or fax it to the Credit Department at (800) 416-0327

### COMPLETE SECTION A FOR BUSINESS CREDIT

#### SECTION A – BUSINESS

BUSINESS LEGAL NAME		CONTACT PERSON/TITLE		TELEPHONE ( ) FAX ( )	
ADDRESS (STREET)	CITY	STATE	COUNTY	ZIP	
LOCATION OF EQUIPMENT (STREET)	CITY	STATE	COUNTY	ZIP	
YEARS IN OPERATION	YEARS UNDER CURRENT OWNERS	<input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	<input type="checkbox"/> SEMI-PRIVATE <input type="checkbox"/> OTHER	DATE AND STATE OF INCORPORATION	
<input type="checkbox"/> PARTNERSHIP		<input type="checkbox"/> MEMBER OWNED CORPORATION		<input type="checkbox"/> INVESTOR OWNED CORPORATION	
<input type="checkbox"/> OTHER		NUMBER OF MEMBERS (IF PRIVATE)			
				NUMBER OF HOLES OPEN TO PLAY	
IS APPLICANT A REAL ESTATE DEVELOPER?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
IS APPLICANT LEASING THE GOLF COURSE OR OPERATING AS A CONCESSION?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
FEDERAL ID#					
NAME OF PRINCIPALS/PARTNERS		HOME ADDRESS OF PRINCIPALS		TITLE	SOCIAL SECURITY NUMBER
NAME OF PARENT CO. IF SUBSIDIARY		PARENT COMPANY ADDRESS			

### COMPLETE SECTION B FOR BUSINESS CREDIT FOR SOLE PROPRIETOR

#### SECTION B – BUSINESS (SOLE PROPRIETOR)

NAME (LAST, FIRST, MI)	DOB	SOCIAL SECURITY #	PREVIOUS ADDRESS (if less than 18 mo. at present)		
PRESENT ADDRESS			CURRENT EMPLOYER	HOW LONG? Yrs. Mos.	PHONE #
CITY	STATE	ZIP CODE	<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	POSITION	GROSS MO. INCOME
HOW LONG? Yrs. Mos.			HOME PHONE ( )	DRIVERS LICENSE #	ARE YOU SELF-EMPLOYED <input type="checkbox"/> YES <input type="checkbox"/> NO
			PREVIOUS EMPLOYER (if present employer is less than 2 years) Yrs. Mos. POSITION		

### COMPLETE SECTION C FOR ALL BUSINESS CREDIT

<b>BANK REFERENCES:</b>		ADDRESS(ES)			
BANK NAME		STREET	CITY	STATE	ZIP PHONE ( )
ACCOUNT NUMBER	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	<input type="checkbox"/> LOAN <input type="checkbox"/> OTHER	OFFICER		
BANK NAME		STREET	CITY	STATE	ZIP PHONE ( )
ACCOUNT NUMBER	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	<input type="checkbox"/> LOAN <input type="checkbox"/> OTHER	OFFICER		
<b>TRADE REFERENCES</b>					
COMPANY NAME		ADDRESS		CONTACT	TELEPHONE

Have you previously financed equipment with Textron Financial Corporation?  Yes  No

If yes, under what legal name? \_\_\_\_\_ Account Number \_\_\_\_\_

Each individual signing below certifies that the information provided in this Customer Information Update is accurate and complete. Each individual signing below authorizes you to obtain information from the references listed above and obtain a consumer credit report that will be ongoing and relate not only to the evaluation and/or extension of the business credit requested, but also for purposes of reviewing the account, increasing the credit line on the account (if applicable), taking collection action on the account, and for any other legitimate purpose associated with the account as may be needed from time to time. Each individual signing below further waives any right or claim which such individual would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.

Information contained herein will be for the exclusive use of Textron Inc., its affiliates and subsidiaries including but not limited to Textron Financial Corporation ("TFC") In the event of credit approval from TFC, applicant hereby grants a security interest in the property to be financed by TFC and agrees that TFC may file a UCC Financing Statement with respect to such property.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_ Authorized Owner/Officer

\_\_\_\_\_ Authorized Owner/Officer

#### ECOA NOTICE (TO BE RETAINED BY APPLICANT)

Thank you for your business credit application. We will review it carefully and get back to you promptly. 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 that statement, please contact us within 60 days from the date that you are notified of our decision. We will send you a written statement of the reasons for the denial within 30 days of 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 our compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.