

FIRST FINANCIAL

Municipal Lease Purchase Application

SUPPLIER INFORMATION

VENDOR NUMBER VENDOR NAME CONTACT PHONE

CUSTOMER INFORMATION

LEGAL NAME ADDRESS

CITY STATE ZIP PHONE FED. TAX I.D. #

CONTACT PERSON E-MAIL ADDRESS ALTERNATIVE CONTACT PERSON E-MAIL ADDRESS

BILLING ADDRESS (IF DIFFERENT FROM ABOVE) CITY STATE ZIP

YEAR MUNICIPAL ENTITY WAS ESTABLISHED

LEASE INFORMATION

DESCRIPTION OF PRODUCT PAYMENT AMOUNT

PRODUCT COST LEASE TERM PAYMENTS
 Monthly Quarterly Annual

You understand that this application is for obtaining a Lease that is a "bank qualified tax-exempt obligation" as defined by Section 265(b)(3)(B) of the Internal Revenue Code and represent that the aggregate face amount of all tax-exempt obligations (excluding private activity bonds other than qualified 501(C)(3) bonds) issued or to be issued by You and Your subordinated entities during the calendar year in which We fund this Lease is not reasonably expected to exceed \$10,000,000.

Your Initials

Each individual signing below certifies that the information provided in this credit application is accurate and complete. Each individual signing below authorizes you or any assignee or funding source which may be utilized (collectively referred to as "Lenders") to obtain information 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.

X
 SIGNATURE SIGNER'S PRINTED NAME DATE

TITLE CONTACT PHONE

X
 SIGNATURE SIGNER'S PRINTED NAME DATE

TITLE CONTACT PHONE

ECOA NOTICE (TO BE RETAINED BY APPLICATION)

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.

IMPORTANT NEW CUSTOMER INFORMATION

To help the government fight the funding of terrorism and money laundering activities, Federal law requires financial institutions to obtain, verify and record identifying information on new customers. The data requested above will allow us to identify each person signing this application. We may also ask for other identifying documents.

This application must be filled out in its entirety.