



PHONE: 877-323-6691

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CREDIT APPLICATION

APPLICANT INFORMATION

PRIMARY APPLICANT

FULL NAME: _____

DATE OF BIRTH: _____ S.S. # _____

D.L. # _____ STATE: _____

HOME PHONE # _____ CELL PHONE # _____

PRESENT ADDRESS

MAILING ADDRESS _____

COUNTY _____ CITY _____ STATE _____ ZIP _____

PHYSICAL ADDRESS _____

COUNTY _____ CITY _____ STATE _____ ZIP _____

HOW LONG _____ OWN _____ RENT _____

COMPANY INFO

COMPANY NAME _____ TAX ID # _____

TRUCKS IN FLEET _____ # TRAILERS IN FLEET _____

YEARS/ OWNER OPERATOR _____ YEARS DRIVING TRUCK _____

EQUIPMENT FINANCED BY _____

CONTACT NAME _____ CONTACT # _____

(MUST FILL OUT FINANCE SECTION EVEN IF PAID OFF)

EMPLOYER REFERENCES

COMPANY _____ COMPANY _____

PHONE # _____ PHONE # _____

CONTACT _____ CONTACT _____

EQUIPMENT PURCHASE

TRADE

___NEW ___USED

SIZE _____ SIZE _____

YEAR _____ YEAR _____

MAKE _____ MAKE _____

MODEL _____ MODEL _____

EXTRAS _____ EXTRAS _____

SALES PRICE W/ FET _____

TRANSACTION

TERMS (# OF MONTHS) _____

CASH DOWN _____

TRADE ALLOWANCE _____

THE INFORMATION GIVEN ABOVE IS TRUE AND COMPLETE. LENDER MAY RECEIVE FROM AND DISCLOSE TO OTHER PERSONS, INCLUDING CREDIT REPORTING AGENCIES, INFORMATION ABOUT APPLICANT'S ACCOUNTS AND CREDIT EXPERIENCE AND APPLICANT AUTHORIZES ANY PERSON TO RELEASE TO LENDER CREDIT EXPERIENCE AND ACCOUNT INFORMATION ON APPLICANT. THIS SHALL BE A CONTINUING AUTHORIZATION FOR ALL PRESENT AND FUTURE DISCLOSURES OF ACCOUNT INFORMATION AND EXPERIENCE ON APPLICANT MADE BY LENDER OR ANY PERSON REQUESTED TO RELEASE SUCH INFORMATION TO LENDER.

CUSTOMER SIGNATURE _____

DATE _____