



BUSINESS CREDIT APPLICATION

DEALER		LOCATION	
CONTACT		PHONE	FAX

Legal Name: _____ **Date of Birth (for Individuals):** _____ **DBA:** _____

Proprietorship Corp. Sub S LLC. Partnership Other: _____ Tax Exempt Number: _____

State-issued Organization # (not tax id #): _____ State of Organization or state of legal residence for individuals: _____

SOC SEC # / TAX ID #	Gross Profit (Monthly Income)	Type of Business	Yrs in Business	E-Mail and Website Address
Primary Address: Street	City	County	State	Zip
Billing Address: Street (if different from above)	City	County	State	Zip
Fleet Manager Name:	Phone #	E-mail Address		
Garage Address: Street	City	County	State	Zip
Business Phone #	Fax #	Mobile Phone #	Contact Name	
Owner/Guarantor: Name	Title	Address	City	State and Zip
Owner/Guarantor: Name	Title	Address	PH#	Social Security # Date of Birth Ownership %

Note: Sole Proprietor, Individual Co-Applicant(s) or Individual Guarantor(s) must complete this section

Complete for Individuals only	Individual (First Name, Middle Name, Last Name, Suffix):		Social Security Number	Date of Birth
	Home Phone ()	<input type="checkbox"/> Own Home Outright <input type="checkbox"/> Buying Home	<input type="checkbox"/> Living with Relatives <input type="checkbox"/> Leasing/Renting	Lived There _____ Yrs. _____ Mos. _____
	Employer / Business		Address	City, State, Zip
	Employer Phone Number ()			
	Monthly Income	Secondary Income *	Source	*Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.
	Title		Time on Job	Mortgage Payt / Monthly Rent
	Name & Address of applicant's non-related personal reference known over one year		Relationship	Home Phone ()

Please use additional applications if more space is needed for multiple owner, quarantor or applicant information.

List other creditors you do business with:

Bank	City & State	Telephone #	Contact	Account #
Trade	City & State	Telephone #	Contact	Account #

Applicant Signature _____ Title _____ Date _____

I intend to apply for joint credit _____
Applicant Initial Here

Co-Applicant Signature _____ Title _____ Date _____

I intend to apply for joint credit _____
Co-Applicant Initial Here

Guarantor Signature _____ Title _____ Date _____

****If corporate guarantor, authorized officer must sign and show corporate title. If partnership guarantor, a general partner must sign and show "Partner" as Title. If individual guarantor, show "Individual" as Title.**

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VEHICLE INFORMATION - (All of the below information is tentative and subject to the terms and conditions of the applicable approval letter. Use additional application for multiple vehicles.)									
Qty	N/U	Year	Make / Model	GVW	Serial / VIN #	Total CAP Cost	Residual %	Est. Payment	
Installed equipment, body uplifts or add-ons, etc. > \$1,000.00:							Total cost of body uplifts / add-ons: \$ _____		
Qty	N/U	Year	Make / Model	GVW	Serial / VIN #	Total CAP Cost	Residual %	Est. Payment	
Installed equipment, body uplifts or add-ons, etc. > \$1,000.00:							Total cost of body uplifts / add-ons: \$ _____		
Trade Detail: QTY:		Year	Make / Model	VIN #	Dealer Allowance	Leinholder	Payoff Amount		

<p><u>Will the vehicles be:</u></p> <p>Used in Hazardous Material Transportation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Used in People Moving Services: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Used in For-Hire Transportation: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Part of a Sub-Lease Arrangement? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>NOTE SPECIFIC PROGRAM OR OTHER DETAIL:</p> <p>_____</p> <p>_____</p>	<p>Terms:</p> <p># of Months _____</p> <p># of Adv. Pmts. _____</p> <p>Circle Skip Months:</p> <p style="text-align: center;">J F M A M J J A S O N D</p> <p>Other:</p> <p>_____</p> <p>_____</p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td>Cash Price</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>Net Trade</td><td style="text-align: right;">- _____</td></tr> <tr><td>Cash Down</td><td style="text-align: right;">- _____</td></tr> <tr><td>FET</td><td style="text-align: right;">+ _____</td></tr> <tr><td>Other Up Front Tax</td><td style="text-align: right;">+ _____</td></tr> <tr><td>Tags & Title</td><td style="text-align: right;">+ _____</td></tr> <tr><td>Cap Cost</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>Est. Payment</td><td style="text-align: right;">\$ _____</td></tr> </table>	Cash Price	\$ _____	Net Trade	- _____	Cash Down	- _____	FET	+ _____	Other Up Front Tax	+ _____	Tags & Title	+ _____	Cap Cost	\$ _____	Est. Payment	\$ _____
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Cap Cost	\$ _____																	
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California Disclosure

Applicant, if married, may apply for a separate account.

Maine Resident

If your credit application is approved and you finance the purchase of your motor vehicle through Creditor, you will be required to insure the vehicle against loss or damage. Creditor requires collision coverage and comprehensive coverage or fire and theft coverage. In addition, if this application is for a lease, Creditor will also require you to obtain liability insurance.

You have the option to select an agent or broker of your choice, whether or not affiliated with Creditor. Obtaining insurance from a particular agent or broker does not affect credit decisions by Creditor, unless the insurance product selected violates the terms of your contract for the purchase or lease of the motor vehicle.

Ohio Disclosure

The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Rhode Island Resident

A Credit Report may be requested in connection with this application for credit. Vehicle insurance may be obtained from a person of your choice.

Tennessee Resident

You must maintain insurance during the term of the contract. You must give the Creditor evidence of this insurance. The amount and type of insurance must be acceptable to the Creditor. YOU MAY CHOOSE THE PERSON THROUGH WHOM ANY INSURANCE IS OBTAINED.

Vermont Resident

By signing this credit application, Applicant consents to your obtaining a credit report for the purposes of evaluating this application and to obtain subsequent credit reports, in connection with this transaction, for the purpose of reviewing the account, taking collection action on the account or for any other legitimate purpose associated with the account.