



TRAILER SALES CREDIT APPLICATION

I: GENERAL INFORMATION

Name:		Date:	
Company Name:			
Individual:	Date of Birth:	S/S#:	
LLC:	Motor Carrier#:		
Corp:	Federal Employer Identification #:		
Address:			How Long:
City:	State:	Zip:	County:
Home Phone:		Work Phone:	Cell:
Own:	Mortgagor or Landlord Name:		
Rent:	Address:		
Lease:	City:	State:	Zip:
If Own: Monthly Mortgage Payment:\$		Market Value: \$	
If Rent: Monthly Rental Payment: \$		Married:	Single:
Spouse's Name:		Spouse S/S#:	
Spouse's Employer:		Years:	Spouse's Income:\$
Source of Any Other Income:		Other Income: \$	
Previous Address:	City:	State:	Zip:
Corporation:		Date of Inc.:	
Inc. in What State:		Date in Bus.:	
Principal Name:		Title:	% Own:
Principal Name:		Title:	% Own:
Reference Name:		Address:	
City:	State:	Zip:	Phone:
Reference Name:		Address:	
City:	State:	Zip:	Phone:

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II. FINANCIAL & CURRENT CREDIT STATEMENT

Assets (What is owned):			
Bank Name:			ASSET VALUE:
City:	State:	Acct#:	
Phone:			
Banker's Name:			
Accounts Receivable (anyone owing you money)			
Real Estate (describe)			
Trucks Owned (describe)			
Trailers Owned (describe)			
Auto & Other (describe)			
Other Assets (describe)			
Total Assets: (add above asset section)			\$

Liabilities (What is owed)			
Accounts Payable (dept such as Dr. bills, Fuel bills, Credit Cards, etc.)			
Name	City, ST	Phone	Amount Owing:
Financed by (Notes payable - Truck, Trailers, Equipment, House Mortgage, etc.)			
Name	City, ST	Phone	Amount Owing:
Total Liabilities (add above liabilities section)			\$

Previous Equipment Credit				
Description	Financed by/City, State	Phone#	Amount Financed	Yr. Paid

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III. EMPLOYMENT INFORMATION

Present and Past Employment for Five Years (present or last employer first)	
Name of Company:	Contact:
Address:	Phone:
Occupation:	Started: Ended:
Name of Company:	Contact:
Address:	Phone:
Occupation:	Started: Ended:
Name of Company:	Contact:
Address:	Phone:
Occupation:	Started: Ended:
Name of Company:	Contact:
Address:	Phone:
Occupation:	Started: Ended:
Who Will You Operate For?	Contact: Phone:
How Long have you Been With Them?	How Long as an Owner/Operator?
# Of Trucks Owned Or Leased:	Monthly Income: \$
Describe Nature of Business: (Materials to be hauled - Between what points - Construction, Over the Road, ICC Permits - Etc.)	
Is Work Steady Throughout the Year? YES: NO:	
Truck Being Purchased is A Replacement Addition: New Venture:	
Have You Owned A Truck Before? YES NO	

IV. OTHER

Any Repossession History?	Yes	No	Explain:
Any Bankruptcy History?	Yes	No	Explain:
I/we authorize any financial institution or other credit reference to verify information or provide additional information which Inland Pacific Trailer Sales and/or their assigns may request. I/we further specially consent to and authorize the obtaining and use of consumer credit reports now and from the time to time, as needed in the credit evaluation and review process.			
For the purpose of procuring and maintaining credit, the undersigned submits the foregoing statement and information contained on this sheet, both written and printed, and including supplemental sheets if any, as being a full, true, and correct statement of his financial condition on the date stated. The undersigned agrees to notify Inland Pacific Trailer Sales immediately in writing of any materially unfavorable (or favorable) change in his financial condition, and in the absence of such notice or of a new and full written statement, this may be considered as a continuing statement and substantially correct. I am Informed and consent that an inquiry may be made which will provide information concerning my character general reputation, personal characteristics and mode of living. Upon my written request, additional information as the scope of this inquiry, if one is made, will be provided.			
Signature:	Date		
Signature:	Date		

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PERSONAL REFERENCES

Name:	Relationship:
Address:	Phone:
Name:	Relationship:
Address:	Phone:

Please Provide a copy of CDL