

Credit Application

Fax to: 989-883-2451

I. Personal Information

Date: _____ Customer Name: _____

Business type: Sole Proprietor Partnership LLC Corporation Date of Inc & State _____

Social Security # _____ Date of Birth _____

Telephone Numbers Business: (____) _____ Residence: (____) _____

Cell: (____) _____ Fax (____) _____

Email Address: _____

Spouse/Co-Applicant: _____ Birth Date: _____

Spouse/Co-Applicant Social Security #: _____

Present Address: _____

	City	State	Zip Code	Country
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Own _____ Rent _____ How long? _____ years _____ months Monthly Payments _____

Mortgage Payable to /Or Landlord (Name & Address) _____

Have you every filed for Bankruptcy or had a vehicle repossessed? _____

II. Employment Information

Years Driving Experience: _____ Time as Owner/Operator: _____ Years _____ Months

Current Fleet Size Tractors/Trucks #: _____ Trailers#: _____ Buyer to Drive? Yes No

D/B/A/ trade name: _____ Time in Business: _____ Years _____ months

Address if Different from above: _____

FED ID# (If applicable): _____

Company to Haul for: _____ How Long There? _____ Years _____ months

Contact: _____ Phone #: (____) _____

Previous Hauling/Work reference: _____ How Long? _____ Years _____ months

Contact: _____ Phone#: (____) _____

III. Financial Information

Bank #1: _____ Bank Officer Name _____

Phone #: (____) _____ Type of Account: _____ Loan#: _____

Checking Acct. #: _____ Savings Acct. #: _____

Bank #2: _____ Bank Officer Name _____

Phone #: (____) _____ Type of Account: _____ Loan#: _____

Checking Acct. #: _____ Savings Acct. #: _____

Equipment Loans/ Leases:

_____	_____	_____	(____)	_____
Equipment	Finance Company	Account #	Phone #	Contact

_____	_____	_____	(____)	_____
Equipment	Finance Company	Account #	Phone #	Contact

IV. Equipment Information

Stock # _____ Year _____ Make _____ Model _____

Purchase Price: _____

I, the undersigned, state that the information provided above is complete, accurate, and truthful. The undersigned individual who is either a principal, personal guarantor or a sole proprietor of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents and authorizes Ellenbaum Truck Sales, Inc. and / or it's designee the use of a consumer credit report on the undersigned, from time to time as may be needed as well as the release of any and all information requested for the purpose of granting business credit. A photocopy of this release will act as an original.

_____	_____	_____	_____
Signature	Print Name	Title	Date

_____	_____	_____	_____
Signature	Print Name	Title	Date

SPOUSE / CO-APPLICANT MUST SIGN IF THEY ARE NAMED ON APPLICATION

For Office Use Only: _____ ETS Sales Rep: _____

Submitted to: _____ Contact: _____ Date: _____

Submitted to: _____ Contact: _____ Date: _____

Submitted to: _____ Contact: _____ Date: _____

Owner Personal Financial Statement

Name: _____ SSN: _____

Home Address: _____ Home Phone: _____

City, State, Zip: _____ Business Phone: _____

Assets

Liabilities

Cash in Bank Accounts		Notes Payable	
Accounts/Notes Receivable		Accounts Payable	
Stocks/Bonds/Mutual Funds		Credit Card Debt	
Real Estate (Market Value)		Mortgage(s)	
Real Estate (Market Value)		2 nd Mortgage(s)	
Automobiles Owned		Automobile Loans	
Equipment Owned		Equipment Debt	
Other Assets (Itemize):		Other Liabilities (Itemize):	
Total Assets:		Total Liabilities:	

Net Worth (Subtract your total liabilities from total assets)	
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Income Information

Contingent Liabilities

Salary			
Commissions			
Dividends			
Real Estate Income			
Other			
Total Income		Total Contingent:	

Additional Notes Regarding Information

Signature

Date

Spouse Signature

Date