

RES, LLC Truck & Trailer Sales

Commercial Credit Request PH 859-485-3450 FAX 859-485-3320

REP	APPLICATION TAKEN FROM <input type="checkbox"/> APPLICANT <input type="checkbox"/> SUPPLIER	ADDRESS/PHONE/CONTACT	TIME	DATE
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GENERAL INFORMATION

PROPRIETORSHIP?	PARTNERSHIP?	CORPORATION (C) OR (S) OR (LLC)	YEARS IN BUSINESS	DATE INCORPORATED	WHAT STATE
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APPLICANT OBA

ADDRESS

CITY/STATE/ZIP COUNTY HOW LONG?

FORMER ADDRESS (IF LESS THAN 5 YRS.)

BUSINESS PHONE & FAX	HOME PHONE	CELLPHONE	SSN/FED ID	DOB
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CO-APPLICANT / SPOUSE	SSN	DOB
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IF CORPORATION PRINCIPALS NAMES/ ADDRESS/SSN PRESIDENT OR LLC MANAGING MEMBER:	STOCK %
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SECRETARY/TREASURER OR LLC MEMBERS:

ANY CREDIT PROBLEMS?	EXPLANATION
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

NEAREST RELATIVE:	ADDRESS/PHONE #	RELATIONSHIP
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ATTACHSALES ORDER EQUIPMENT PURCHASE **ATTACHSALES ORDER**

COLLATERAL:	YEAR	MAKE	MODEL	SELLING PRICE \$	DOWN PAYMENT \$	TRADE IN \$	AMOUNT TO FINANCE \$
NEW / USED				DESC:			
ENGINE	TRANS	SLEEPER	WHEELS	LOAN	LEASE	DELIVERY DATE	TERM / # MONTHS

TAX EXEMPT?	ICC #	ADDITION?	REPLACEMENT?	PAYMENTS ADV/RESIDUAL	PAYMENTS DESIRED/QUOTED
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NEW EQUIPMENT WILL BE LEASED ON WITH - PHONE & CONTACT:	PREVIOUSLY OWNED/LEASED: # TRUCKS _____ # TRAILERS _____	CURRENTLY OWNED/LEASED: # TRUCKS _____ # TRAILERS _____
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PRESENT TRUCKS & TRAILERS FINANCED WITH: PHONE/ ADDRESS/ ACCOUNT #

PREVIOUS TRUCKS & TRAILERS FINANCED WITH: PHONE/ ADDRESS/ ACCOUNT #

GARAGE ADDRESS / TITLING ADDRESS / PLATING ADDRESS - IF OTHER THAN ABOVE

SUPPLIERS -FUEL / TIRES: ADDRESS/PHONE/CONTACT

MAIN ACCOUNTS / EMPLOYMENT / TRUCK USAGE

COMPANY/ADDRESS/PHONE	HOW LONG?	YRS EXPERIENCE	YRS 0/0 EXPERIENCE	RADIUS	BASE STATE
COMPANY/ ADDRESS/PHONE	HOW LONG?	PRODUCTS HAULED		MILEAGE AMT/ % OF LOAD	
COMPANY/ADDRESS/PHONE	HOW LONG?	WHEN PAID	GROSS PER MONTH	COL LICENCE #	ISSUE STATE

DRIVER (IF NOT PURCHASER) - NAME/ADDRESS/SSN/CDL #/DOB:

INSURANCE INFORMATION

INSURANCE DESIRED?	CREDIT LIFE	LIABILITY	PHYSICAL DAMAGE	BOBTAIL/DEADHEAD	CARGO	DOWNTIME	DRIVER BENEFIT
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TRAFFIC TICKETS/ACCIDENTS/LOSSES -NAME/ADDRESS/PHONE #OF AGENT

RES, LLC Truck & Trailer Sales / Credit Application / Statement

APPLICANT	ADDRESS	STATEMENT DATE
BANKS	CITY / STATE	PHONE & CONTACT
ACCOUNT #S	CKG	SVGS
		OTHER

ASSETS		LIABILITIES	
CASH ON HAND / IN BANKS:		ACCTS PAYABLE / MONTHLY CHARGES	
INBANKS: \$	ON HAND: \$	\$	\$
ACCOUNTS RECEIVABLES		NOTES	
FROM		CREDIT CARDS	
SVGS / CD'S / IRA'S			
WHERE		MORTGAGE(S)	
LIST ALL REAL ESTATE			
COST \$ _____ WHEN _____			
DESCRIPTION			

TRUCKS & TRAILERS (Describe)	FINANCED BY (Where)

AUTOS & EQUIPMENT (Describe)	FINANCED BY (Where)
TOTAL ASSETS	TOTAL LIABILITIES

INCOME STATEMENT	NET WORTH
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ACCOUNTANT NAME & ADDRESS:						
FROM	TO	BUSINESS GROSS INCOME	OTHER INCOME	DEPRECIATION	EXPENSES	OPERATING PROFIT

BANK AND/OR LENDER NAME

The signature(s) below authorize the release of information to RES, LLC Truck and Trailer Sales, its affiliates, assigns, or participating lenders, necessary to process my / our credit application. This includes, but is not limited to information concerning my / our checking accounts, savings accounts, deposit accounts, loan and lease histories, for both open and paid accounts, personal and commercial. The undersigned has given a statement for the purpose of being granted credit and warrants its truth and accuracy. We are applying for joint credit.

A photocopy or fax copy of this application will be considered as valid as the original.

APPLICANT SIGNATURE

CO-APPLICANT SIGNATURE

X _____

PRINT NAME: _____

HOME ADDRESS / SSN: _____

X _____

PRINT NAME: _____

HOME ADDRESS / SSN: _____