Credit Application

Please complete all applicable fields. Incomplete information may delay credit approval.

CUSTOMER / BUSINESS INFORMATION

DATE | CUSTOMER / BUSINESS NAME | DOING BUSINESS AS | YEARS IN BUSINESS

BUSINESS TYPE | STATE OF INCORPORATION | DATE INCORPORATED | FEDERAL TAX ID | DOT # | MC #

BUSINESS SIGNER / OWNER 1 | % OWNERSHIP | BUSINESS SIGNER / OWNER 2 | % OWNERSHIP

APPLICANT / GUARANTOR INFORMATION

APPLICANT NAME | DATE OF BIRTH | SOCIAL SECURITY NUMBER

CURRENT STREET ADDRESS | CITY / STATE / ZIP | COUNTY

HOW LONG AT CURRENT ADDRESS - YEARS | MONTHS | MONTHLY RENT / MORTGAGE | CELL PHONE | EMAIL

HOUSING

☐ Own ☐ Rent

MARITAL STATUS

☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Divorced

DRIVING / OPERATING INFORMATION

COMMERCIAL DRIVER'S LICENSE # | ISSUE STATE / PROVINCE | ISSUE DATE | EXPIRATION DATE

TRUCK DRIVING EXPERIENCE - YEARS / MONTHS | OWNER / OPERATOR EXPERIENCE - YEARS / MONTHS | STATE VEHICLE WILL BE TITLED

APPLICANT WILL DRIVE THIS PURCHASE?

☐ Yes ☐ No

FIRST-TIME OWNER/OPERATOR?

☐ Yes ☐ No

FIRST TRUCK/TRAILER PURCHASE?

☐ Yes ☐ No

TYPE OF GOODS HAULED | PRIMARY OPERATING AREA / ROUTES

CREDIT / LEGAL INFORMATION

HAVE YOU EVER TAKEN BANKRUPTCY?

☐ Yes ☐ No

DEFENDANT IN ANY LEGAL ACTION?

☐ Yes ☐ No

ANY ITEM REPOSSESSED?

☐ Yes ☐ No

IF YES TO ANY ABOVE, PLEASE EXPLAIN

NEAREST RELATIVE NOT LIVING WITH YOU

NAME | RELATIONSHIP | PHONE | CITY / STATE

BANK REFERENCES

BANK NAME 1 | PHONE | ACCOUNT NUMBER | ACCOUNT TYPE

CITY / STATE | CONTACT | BALANCE | DATE OPENED

BANK NAME 2 | PHONE | ACCOUNT NUMBER | ACCOUNT TYPE

CITY / STATE | CONTACT | BALANCE | DATE OPENED

Credit Application

CURRENT EQUIPMENT CREDIT

LENDER / INSTITUTION 1 | PHONE | ACCOUNT NUMBER | BALANCE

YEAR / MAKE / MODEL | CONTACT | MONTHLY PAYMENT | DATE OPENED

LENDER / INSTITUTION 2 | PHONE | ACCOUNT NUMBER | BALANCE

YEAR / MAKE / MODEL | CONTACT | MONTHLY PAYMENT | DATE OPENED

INCOME SOURCES

EMPLOYER / INCOME SOURCE 1 | CONTACT NAME | PHONE | TIME WITH SOURCE

GROSS MONTHLY INCOME | % TOTAL MONTHLY REVENUE | COMMODITY HAULED | HAULED BETWEEN WHAT POINTS?

EMPLOYER / INCOME SOURCE 2 | CONTACT NAME | PHONE | TIME WITH SOURCE

GROSS MONTHLY INCOME | % TOTAL MONTHLY REVENUE | COMMODITY HAULED | HAULED BETWEEN WHAT POINTS?

HAULING REFERENCES

Please list two companies, brokers, shippers, or customers that can verify hauling history.

HAULING REFERENCE 1 - COMPANY | CONTACT NAME | PHONE | TIME HAULING FOR THEM

EMAIL | FREIGHT / COMMODITY | APPROX. MONTHLY REVENUE | CONTRACT / DEDICATED LANE?

HAULING REFERENCE 2 - COMPANY | CONTACT NAME | PHONE | TIME HAULING FOR THEM

EMAIL | FREIGHT / COMMODITY | APPROX. MONTHLY REVENUE | CONTRACT / DEDICATED LANE?

EQUIPMENT BEING PURCHASED

CONDITION

☐ New ☐ Used

EQUIPMENT TYPE

☐ Truck ☐ Trailer ☐ Other

YEAR | MAKE | MODEL | VIN / SERIAL NUMBER

PURCHASE PRICE | DOWN PAYMENT | TRADE ALLOWANCE | AMOUNT REQUESTED

TRADE INFORMATION - IF APPLICABLE

YEAR | MAKE | MODEL | VIN / SERIAL NUMBER

CURRENT LENDER | APPROX. PAYOFF | TRADE ALLOWANCE | PAID OFF?

Credit Application

SPOUSE / JOINT APPLICANT - IF APPLICABLE

Complete if this is a joint application, spouse income/assets are relied upon, or otherwise required by applicable law.

SPOUSE / JOINT APPLICANT NAME | DATE OF BIRTH | SOCIAL SECURITY NUMBER

EMPLOYER | POSITION | WORK PHONE | MONTHLY INCOME

DRIVER INFORMATION - IF APPLICANT IS NOT DRIVER

DRIVER NAME | DATE OF BIRTH | TRUCK DRIVING EXPERIENCE

DRIVER CDL # | ISSUE STATE / PROVINCE | ISSUE DATE | EXPIRATION DATE

DRIVER STREET ADDRESS | CITY / STATE / ZIP

CURRENT FLEET / EXPANSION

IS THIS ADDITIONAL EQUIPMENT?

☐ Yes ☐ No

IF YES, JUSTIFY EXPANSION OF FLEET

TRUCKS LEASED | # TRUCKS OWNED | # OWNER OPERATORS | TOTAL TRUCKS | AVG TRUCK FLEET AGE

TRAILERS LEASED | # TRAILERS OWNED | TOTAL TRAILERS | AVG TRAILER FLEET AGE | OPERATION

OPERATION

☐ Seasonal ☐ Year-Round

APPLICANT AUTHORIZATION

For the purpose of establishing 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 my financial condition and all above matters, on the date stated. The undersigned agrees to notify you immediately in writing of any materially unfavorable change in my financial condition of the above matters, and in the absence of such notice or of a new and full written statement, all matters herein may be considered as a continuing statement and substantially correct. The undersigned hereby authorizes Geis Dealer Group and/or any prospective creditor or financial institution to which this application may be submitted to make inquiry into, to request, and to receive any information concerning my character, general reputation, personal characteristics, mode of living, and all information from creditors which such creditor or financial institution deems relevant for the granting and collection of the proposed borrowing. This authorization shall be effective from the date upon which this application is signed and is extinguished automatically upon full payment of the present borrowing, if any is granted. Upon my written request, additional information as to the scope of this inquiry, if one is made, will be provided.

I further represent that neither the undersigned, any principal officer of the undersigned, nor any contemplated operator of any equipment proposed to be purchased has any record or reputation of having violated any federal or state laws relating to liquor, narcotics or contraband, and no such person has been convicted of any felony.

I understand that Geis Dealer Group, and/or Seller of motor vehicle, parts or services to whom this application is presented, will be relying on the accuracy of the matters set forth herein as a basis for extending any credit which I may receive.

SIGNATURES

APPLICANT SIGNATURE - TYPE NAME | DATE | TITLE

SPOUSE / JOINT APPLICANT SIGNATURE - TYPE NAME | DATE | TITLE

Typed signature fields are provided for convenience; a creditor may require an ink or compliant electronic signature.