

Applicant Information

If application is completed in a business name, please complete information for all owners.

First Name: _____ Middle: _____ Last: _____ Suffix: _____ SSN: _____ DOB: _____

Business Name (If Applicable): _____ Business Fed Tax ID: _____

Mailing Address: _____ % Ownership _____ DBA LLC INC.

City: _____ State: _____ County: _____ Zip: _____ Business Phone: _____

Physical Address (if different): _____ Cell Phone: _____

City: _____ State: _____ County: _____ Zip: _____ Fax Number: _____

Do you own your own home? _____ If Yes, How many years? _____ Email: _____

Please answer yes or no to the following questions. If your answer is yes, please attach explanation.

Ever Filed Bankruptcy? _____ Ever Had Repossession? _____ Are you a defendant in a legal action? _____

What type of equipment are you inquiring about? New Used Unit # or type of truck? _____**Employment Information**First Time Operator? Yes No Time with CDL (Years/Months): _____ Time as Owner/Operator (Years/Months): _____Reason for Purchase: Additional Unit Replacement Unit Buyer to Drive? Yes No Type of goods hauled? _____

What state will the truck be registered? _____ Will the truck be titled in personal or business name? _____

Work/Haul Reference Name: _____ Phone #: _____ How long there? _____ Driver Owner/Operator Work/Haul Reference Name: _____ Phone #: _____ How long there? _____ Driver Owner/Operator Work/Haul Reference Name: _____ Phone #: _____ How long there? _____ Driver Owner/Operator **Financial Information**Do you have your own authority? Yes No # Trucks Owned? _____ # Trailers Owned? _____

Insurance Agent Name: _____ Insurance Phone #: _____

Current Truck Finance with: _____ Finance Company Phone #: _____

Equipment (Year/Make/Model): _____

Other Lenders:

1. Lender Name: _____ Phone #: _____

Equipment Financed (Year/Make/Model): _____ Trade? Yes No

2. Lender Name: _____ Phone #: _____

Equipment Financed (Year/Make/Model): _____ Trade? Yes No

3. Lender Name: _____ Phone #: _____

Equipment Financed (Year/Make/Model): _____ Trade? Yes No

Primary Bank Name: _____ Phone #: _____ Primary Contact: _____

Other Bank Name: _____ Phone #: _____ Primary Contact: _____

Regulation B Notice of Intent to Apply for Joint Credit*Regulation B and the Equal Credit Opportunity Act requires that a lender obtain evidence of each loan applicant's intent to apply for joint credit before a credit decision can be made. Failure to complete when required will render the application/request for credit incomplete. Please mark one of the following choices:* I (we) intend to apply for joint credit. I (we) DO NOT intend to apply for joint credit.**Acknowledgement***The undersigned certifies that the information given above is true and complete and authorizes Truckworx, Inc., its subsidiaries, and their assigns or potential assigns, or any other lender that this application is submitted to, to investigate the above information and the undersigned's accounts and credit experience. This shall be a continuing authorization for all present and future disclosures of account information and credit experience on the undersigned by Truckworx, Inc. or any person requested to release such information to Truckworx, Inc. The undersigned has read our company's privacy policy that can be found at www.truckworx.com and acknowledges receipt of Regulation B Notice.*

Applicant Signature: _____ Co-Applicant Signature: _____

Print: _____ Date: _____ Print: _____ Date: _____

Co-Applicant SSN: _____ DOB: _____