



**Kimberlee Rottweiler**  
 P.O. Box 125, Wilton, CA 95693  
 (916) 687-6245 Fax: (916) 848-3347

**Truck/Trailer Credit Application** (Attach Additional Application if Co-applicant)

<b>Applicant (Borrower/Leasee)</b>							Date:	
Full Name	Social Security Number			Date of Birth		Number of Dependents (excluding self)		
Street Address	City	State	Zip	Own or Rent	Time at Address (Yrs/Mos)	Home Phone	Fax	
Previous Street Address (if less than 5 years)	City	State	Zip	Time at Address (Yrs/Mos)				
Mortgage Company	City	State	Account Number			Phone Number		
Name of Nearest Relative	Street Address		City	State	Zip	Home Phone		

<b>Business Information</b>							
Business name (Applicant)				Incorporated (Y/N)		Years in Business	Tax I.D. Number
Street Address	City	State	Zip	Business Phone		Business Fax	
Number of Trucks Owned	Leased	Number of Trailers Owned		Leased	Number of Owner/Operators		

<b>Employment</b>							
How Long as Owner/Operator?		Yrs	Mos	How Long as Driver?		Yrs	Mos
Current or New Carrier		City	State	Phone Number		Contact	
How Long?	Yrs	Mos	Average Monthly Miles		Type of Freight		
Period From/To	Gross Truck Income \$		+ Other \$		- Expenses \$	= Profit \$	
Previous Haul	City	State	Phone Number		Contact		
How Long?	Yrs	Mos	Average Monthly Miles		Type of Freight		

<b>Finance or Lease Obligations (Credit References)</b>							
Current Truck Creditor	City	State	Contact	Account Number		Phone Number	
Current Truck Make	Model	Payment Amount		Open Date	Term	Current Balance	
Current Truck Creditor	City	State	Contact	Account Number		Phone Number	
Current Truck Make	Model	Payment Amount		Open Date	Term	Current Balance	
Current Trailer Creditor	City	State	Contact	Account Number		Phone Number	
Current Trailer Make	Model	Payment Amount		Open Date	Term	Current Balance	

**References**

Bank Name	Account Number	Checking	Savings	Loan
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Street Address	Phone Number
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Have you ever taken Bankruptcy (do not answer if in Iowa)  No  Yes — Explain below

Are you a defendant in any legal action?  No  Yes — Explain below

Have you ever had any item repossessed?  No  Yes — Explain below

Explanation:

**Equipment to be Leased or Financed**

Equipment to be leased or purchased:  New  Used  Addition  Replacement State Equipment to be Titled in

<b>Truck:</b> Year	Make	Model	Engine Horsepower	Transmission	Sleeper Size	Suspension
Sale Price	Security Deposit or Cash Down Payment		Trade-In	Trade Pay-Off	Amount to Finance	
\$	\$		\$	\$	\$	

<b>Trailer:</b> Year	Make	Model	Trailer Type	Length & Width	Suspension	Refrigeration Unit Model
Sale Price	Security Deposit or Cash Down Payment		Trade-In	Trade Pay-Off	Amount to Finance	
\$	\$		\$	\$	\$	

Truck Selling Dealer	City	State	Phone	Contact
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Trailer Selling Dealer	City	State	Phone	Contact
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If your application is denied, you have the right to a statement of the specific reasons for denial. To obtain the statement, please contact the Marketing Representative at the telephone number at the top of page one of this application within 60 days from the date you are notified of our conclusion. We will provide you with the statement of reasons within 30 days of receiving your request. If we provide the statement orally, you have the right to have the reasons confirmed in writing. We will send you a written confirmation or reasons for the denial within 30 days of receiving your written request for confirmation.

Notice: The federal Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is: Comptroller of the Currency, Consumer Examinations Division, Washington, DC 20219.

**Signatures**

I certify that the information in this application is true and correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You or your assignee are authorized to check my credit and employment history, obtain insurance information and to answer questions about your credit experience with me. I authorize you to contact my creditors and authorize any creditor so contacted to release to you such credit information as you may request.

Applicant's Signature

Date

**Preferred Supplemental Information**

Please Attach:

Complete tax returns for the last two years (including schedule "C" if not incorporated)

Equipment Specifications