

15727 E. Admiral Place

Tulsa, OK 74116

Ph# (918) 234-9200

Tulsa Truck Depot, Finance Division

C. Brad Foster, Captain Finance

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Commercial Credit Application/Applicant Information/Business or Personal

First	Middle	Last	Suffix JR. SR.	Social Security Number	
FED TAX I.D. #		Your Business Name (if applicable)		Date of Birth	
DBA <input type="checkbox"/>	L.L.C. <input type="checkbox"/>	INC. <input type="checkbox"/>			
Mailing Address		City	State	County	Zip Code
Physical Address (if diff. from mailing)		City	State	County	Zip Code
Home Phone #	Cell Phone #	Do you Own your home? Yes <input type="checkbox"/> No <input type="checkbox"/>		How Long yrs.	
Fax Phone #	E-MAIL Address				
Nearest relative NOT living with you	Address	Phone#	Relationship		
Have you ever taken Bankruptcy? No <input type="checkbox"/> Yes <input type="checkbox"/> Attach Explanation	Are you a defendant in a Legal Action? No <input type="checkbox"/> Yes <input type="checkbox"/> Attach Explanation	Have you ever had a Repo? No <input type="checkbox"/> Yes <input type="checkbox"/> Attach Explanation			

EMPLOYMENT

First time Owner Operator? Yes <input type="checkbox"/> No <input type="checkbox"/>	# of YRS. With CDL / Time as Owner Op Yrs: Mos: / Yrs: Mos:	Reason for Purchase: Additional Unit <input type="checkbox"/> Replacement Unit <input type="checkbox"/>	
Buyer to Drive ? Yes <input type="checkbox"/> No <input type="checkbox"/>	Driver Info (if other than buyer) Name: SS#:	Type of goods / commodities hauled	
Driver's CDL # & CDL State?	Truck to be Registered in what State?	Truck to be Titled in Personal or Business Name	
Where will truck be leased on?	Contact person / dept. at your Lease	Phone Number for new or current Lease	
Current Employer / HAUL REFERENCE	HAUL REF Phone # and Contact name	How long there?	Driver or Owner Operator
Previous Employer / HAUL REFERENCE	HAUL REF Phone # and Contact name	How long there?	Driver or Owner Operator

FINANCIAL INFORMATION

Do you have your own Authority? YES <input type="checkbox"/> NO <input type="checkbox"/>	Insurance Agent Name:	Ins Agent Phone Number:	ICC Number
# of Trucks / Trailers owned Trucks: Trailers:	Would you like Physical Damage Ins Quote?	Would you Like Liability Insurance Quote?	
Current Truck Financed with: Acct#:	Year / Make / Model of Equipment	Phone #	Trade ? Yes No
2nd Truck Financed with: Acct#:	Year / Make / Model of Equipment	Phone #	Still Own?
3rd or Previous Truck Financed with: Acct#:	Year / Make / Model of Equipment	Phone #	Still Own?
Other Equipment Financed with:	Year / Make / Model of Equipment	Phone #	Still Own?

The undersigned certifies that the above information given for credit purposes is true and correct and authorizes any lender to investigate the references, statements or other data listed or accompanying this application. The undersigned authorizes all parties contacted to release credit and financial information requested as part of said investigation.

Co-APPLICANT Name & Social Security Number

x APPLICANT SIGNATURE	DATE	x Co-APPLICANT SIGNATURE	DATE
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