



1460 Bankhead Hwy Carrollton, GA 30116 office: (770) 836-1700 fax: (770) 830-0305
 www.jordantrucksales.com

CREDIT APPLICATION – Please Fill Out Completely

| | | | | |
|---|----------------------------|--|---|------------------------------|
| Date of Application | Salesman | Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married | Homeowner <input type="checkbox"/> Yes <input type="checkbox"/> No | Time at address |
| Name (First, Middle Initial, Last) <input type="checkbox"/> JR. <input type="checkbox"/> SR. | | Social Security Number | | Date of Birth |
| Address - Physical | | City | State | Zip |
| Email Address | | Cell Number | Home Number | County |
| Previous Address (If Less Than Five Years at Current Address) | | Address City, State, Zip | | How Long Years Month |
| Nearest Relative Not Living With You | Address (City State Zip) | | Phone Number | Relationship to You |

BUSINESS INFORMATION

| | | | | |
|---|--|---|--|---|
| Business Name or DBA (If Applicable) | | Years In Business | Contract to be in business name? <input type="checkbox"/> Yes <input type="checkbox"/> No | Federal Tax ID# |
| Address | | City, State, Zip code | | Work Number : |
| Current Fleet Size No. Trucks Trailers | <input type="checkbox"/> Replacement <input type="checkbox"/> Expansion | Borrower is (Check one) <input type="checkbox"/> Individual <input type="checkbox"/> INC <input type="checkbox"/> LLC | | |
| Is this your First Truck Purchase ? <input type="checkbox"/> Yes <input type="checkbox"/> No | | How Long As An Owner Operator Years Months | | CDL Driving Experience Years Months |

HAULING REFERENCES

| | | | | |
|--|-------------------------|------------------|------------------------------|--------------------------------|
| Truck to work for (Primary Revenue Source) | Phone | Contact | Address (City, State, Zip) | |
| Hauling Between What Points | Monthly Gross Income \$ | Commodity Hauled | Length of Relationship ? | Years |
| Current Employer / Haul Reference | Phone No. | | Contact | |
| Previous Employer if Less than 5 years at Current Employment | | | | |
| Purchaser to Drive ? If no, Provide Information on Person who will Drive Truck <input type="checkbox"/> Yes <input type="checkbox"/> No | Drivers Name and CDL# | | | Address (City, State Zip Code) |

PRIOR TRUCK AND TRAILER PURCHASES

| | | | | | |
|------|------|-------|-------------|------------------------|---------------|
| Year | Make | Model | Financed By | Phone Number / Contact | Date Financed |
| Year | Make | Model | Financed By | Phone Number / Contact | Date Financed |
| Year | Make | Model | Financed By | Phone Number / Contact | Date Financed |

| | | |
|---|---|---|
| Have You Ever Filed Bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes - Explain Below | Are You a Defendant in any Legal Action ? <input type="checkbox"/> No <input type="checkbox"/> Yes – Explain Below | Have You Ever Had Any Item Repossessed? <input type="checkbox"/> No <input type="checkbox"/> Yes – Explain Below |
| Explanation : | Explanation: | Explanation: |

The undersigned certifies that the information contained in this application is true & correct & authorizes JORDAN TRUCK SALES INC. or any other lender that this application is submitted to. May investigate the information contained within this application & obtain information about the undersigned's accounts & credit experience. The undersigned authorizes all parties contacted to release credit & financial information requested. This shall be continuing authorization for all present & future inquires & disclosures of account information & credit experience on the undersigned to release such information.

| | | |
|------------|---------|-------|
| Signature: | Title : | Date: |
| Signature: | Title : | Date: |