

**CREDIT APPLICATION**



**DEALER INFORMATION**

DEALER NAME: LOOKOUT VALLEY EQUIPMENT SALES		DEALER PHONE: (866) 365-1951
DEALER CONTACT: MARIA BINGHAM	PHONE: (423) 463-3395	EMAIL: <a href="mailto:MBINGHAM@LVES.COM">MBINGHAM@LVES.COM</a>

**CREDIT APPLICATION**

APPLICANT (COMPLETE LEGAL NAME OF BUSINESS):

BUSINESS ADDRESS:			EQUIPMENT ADDRESS:		
CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:
PHONE:	FAX:	WEBSITE:			
# OF YEARS IN BUSINESS:	FEDERAL TAX ID:		BUSINESS EMAIL:		
# OF YEARS AS A DRIVER:	# OF YEARS O/O:	WILL YOU DRIVE THE UNIT?    YES <input type="checkbox"/> NO <input type="checkbox"/>			

**EXISTING FLEET SIZE**

<u>EQUIPMENT</u>	<u># FINANCED</u>	<u># LEASED (CAPITALIZED)</u>	<u># OWNED</u>	<u># TOTAL</u>
TRUCKS:				
TRAILERS:				

**GUARANTORS / PRINCIPALS**

NAME OF PRINCIPAL / GUARANTOR (FIRST, MI, LAST):				SSN:	
ADDRESS:			CITY:		STATE:    ZIP:
HOMEOWNER?    YES <input type="checkbox"/> NO <input type="checkbox"/>	HOW LONG HAVE YOU OWNED YOUR HOME? YEARS:    MONTHS:		MONTHLY RENT / MORTGAGE:		
HOME PHONE:	CELL PHONE:	DOB:	EMAIL:		
% OF OWNERSHIP:	YEARS WITH COMPANY:	TITLE:			
NAME OF PRINCIPAL / GUARANTOR (FIRST, MI, LAST):				SSN:	
ADDRESS:			CITY:		STATE:    ZIP:
HOMEOWNER?    YES <input type="checkbox"/> NO <input type="checkbox"/>	HOW LONG HAVE YOU OWNED YOUR HOME?    YEARS:    MONTHS:				
HOME PHONE:	CELL PHONE:	DOB:	EMAIL:		
% OF OWNERSHIP:	YEARS WITH COMPANY:	TITLE:			

**PRIMARY HAULING REFERENCES**

#1 REVENUE SOURCE:	% OF REVENUES:
PRIMARY CONTACT:	YEARS OF SERVICE:    PHONE:
#2 REVENUE SOURCE:	% OF REVENUES:
PRIMARY CONTACT:	YEARS OF SERVICE:    PHONE:

**EQUIPMENT REFERENCES**

CREDIT / FINANCE COMPANY NAME:	PHONE:
ACCOUNT #:	
CREDIT / FINANCE COMPANY NAME:	PHONE:
ACCOUNT #:	

**TRANSACTION DETAIL**

YEAR:	MAKE:	MODEL:	SPECIFICATIONS (ENGINE, MILES, TRANS., ETC.):
NEW <input type="checkbox"/> USED <input type="checkbox"/>	REPLACEMENT <input type="checkbox"/> ADDITION	QUANTITY:	
SELLING PRICE:    \$	TERM REQUESTED: 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> 72 <input type="checkbox"/> OTHER <input type="checkbox"/>		
TAXES:    \$	NET TRADE IN: \$	TAX EXEMPT: YES <input type="checkbox"/> NO <input type="checkbox"/>	
CASH DOWN:    \$	AMT. TO FINANCE: \$	RESIDUAL %:	

I hereby certify that the information contained in this application is true and accurate, agree that Lookout Valley Equipment Sales, its parent company, its designee(s) or assignee(s) to obtain, use and rely on, for permissible purposes, information compiled by third party vendors for commercial use and sale, including without limitation that regarding the Applicant's and any Co-Applicant's financial condition, payment history, employment, assets, and personal history; and I hereby authorize our banks, trade references, and financial institutions to release credit information to Lookout Valley Equipment Sales, LLC and/or affiliates or assigns.

PRINT NAME:	SIGNATURE:	DATE:
PRINT NAME:	SIGNATURE:	DATE: