

MARK-IT TRUCK SALES, INC.
40 BILL ALLEN BRANCH RD
BURNSVILLE, NC 28714
PH 888-810-7227 FAX 828-682-7453

Application for Credit Transportation

Business Name: _____ Type of Business: _____

Business Address: _____ City/State/Zip: _____

County: _____ F.E.I. Number: _____ Date Started: _____ No. Employees: _____

Please Circle One: Corporation Partnership Proprietorship LLC

Business Phone: _____ Fax: _____ Mobile: _____

Email: _____ Web Site: _____

Personal Information (please complete on separate application for additional partners or owners)

Applicant's Name: _____ Spouse's Name (if any) _____

Social Security No.: Applicant _____ Spouse _____

Address: _____ City/State/Zip: _____ Home Phone: _____

Business Bank Account (please include 3 months business bank statement)

Bank Name: _____ Account No.: _____

Phone: _____ Fax: _____ Contact Name: _____

Trade/Finance/Lease/ Factor References

Name: _____ Account No.: _____ Contact: _____ Phone: _____

Name: _____ Account No.: _____ Contact: _____ Phone: _____

Name: _____ Account No.: _____ Contact: _____ Phone: _____

Name of Nearest Living Relative

Name: _____ Address: _____ City/State/Zip: _____

Phone: _____ Relationship: _____

Present # of Trucks _____ # Owned _____ # Financed _____ # Leased _____

Present # of Trailers _____ # Owned _____ # Financed _____ # Leased _____

Contract Information under Which Equipment will be operated: _____

Contact: _____ Phone # _____ Products Hauled: _____

Vehicle/Equipment Cost \$ _____ Down Payment Available \$ _____

Seller: _____ Contact: _____ Phone# _____

Equipment Description: _____

The undersigned certifies that the above information given for credit purposes is true and correct and authorizes the firm or person to whom this application is made (or their assignee) and any credit bureau or other investigative agency 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. By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to Credential Leasing Corporation of Tennessee, Inc. or its assignee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A Photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/We affirm my/our identity as the respective individual/s identified in the above application.

Applicant Signature(s): X _____ Date: _____