



## APPLICATION FOR COMMERCIAL CREDIT

### APPLICANT INFORMATION

Requesting Credit For: ☐ Leasing & Rental ☐ Sales ☐ Service ☐ Parts

Company Name \_\_\_\_\_ Federal ID # \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ PUCO # \_\_\_\_\_

Applicant Name / Title \_\_\_\_\_ Email \_\_\_\_\_

Type of Business \_\_\_\_\_ How Long in Business \_\_\_\_\_

☐ Individual Social Security # \_\_\_\_\_ Spouse's SS # (if individual) \_\_\_\_\_

☐ Partnership Partner's Name \_\_\_\_\_ Partner's SS # \_\_\_\_\_

☐ Corporation ☐ S Corp ☐ C Corp ☐ LLC President's Name \_\_\_\_\_

Vice President's Name \_\_\_\_\_

Sales Tax Exempt ☐ Yes ☐ No If yes, please submit Exemption Certificate with this application.

Any Lawsuits or Judgements ☐ Yes ☐ No

Filed Bankruptcy ☐ Yes ☐ No

Tax Obligations Due ☐ Yes ☐ No

How Did You Hear About Us

\_\_\_\_\_

### BILLING INSTRUCTIONS

P.O. Required? ☐ Yes ☐ No If yes, who may issue P.O.? \_\_\_\_\_

A/P Contact Name \_\_\_\_\_ A/P Contact Title \_\_\_\_\_

A/P Contact Phone \_\_\_\_\_ A/P Contact Email \_\_\_\_\_

Billing Address (if different from above)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### INSURANCE

Carrier \_\_\_\_\_ Agent \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

### BUSINESS REFERENCES - BANK

Name \_\_\_\_\_ Location \_\_\_\_\_

Account # \_\_\_\_\_ Contact \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Location \_\_\_\_\_

Account # \_\_\_\_\_ Contact \_\_\_\_\_ Phone \_\_\_\_\_



# TRANSPORT SERVICES

LEASING • SALES • SERVICE • PARTS

CLEVELAND, OH | 440.582.4900

COLUMBUS, OH | 614.851.1888

TOLEDO, OH | 419.442.7600

[TransportServices.com](http://TransportServices.com)

## BUSINESS REFERENCES - TRADE (Exclude fuel, telephone and tire vendors) List 5

Name \_\_\_\_\_ Location/Account # \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Location/Account # \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Location/Account # \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Location/Account # \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Location/Account # \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

## FOR EQUIPMENT FINANCING

Annual Sales \_\_\_\_\_

Annual Profit \_\_\_\_\_

### Equipment Now Owned or Being Purchased (List trucks, tractors, automobiles and all major equipment )

Year \_\_\_\_\_ Make/Type \_\_\_\_\_ Balance \$ \_\_\_\_\_ Payments \$ \_\_\_\_\_

Lender \_\_\_\_\_ Account Number \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Year \_\_\_\_\_ Make/Type \_\_\_\_\_ Balance \$ \_\_\_\_\_ Payments \$ \_\_\_\_\_

Lender \_\_\_\_\_ Account Number \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Year \_\_\_\_\_ Make/Type \_\_\_\_\_ Balance \$ \_\_\_\_\_ Payments \$ \_\_\_\_\_

Lender \_\_\_\_\_ Account Number \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Year \_\_\_\_\_ Make/Type \_\_\_\_\_ Balance \$ \_\_\_\_\_ Payments \$ \_\_\_\_\_

Lender \_\_\_\_\_ Account Number \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

### Property Mortgage or Lease

Property Address \_\_\_\_\_

Balance \$ \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_ Lender/Property Owner \_\_\_\_\_

You are informed that the seller or any financing agency may request an investigative consumer report to be made about you or your character, general reputation, personal characteristics and mode of living. If this report is obtained and you so desire, the nature and scope of the report will be made available to you upon written request.

The above information is and is given for the purpose of obtaining merchandise/services on credit.

Signature \_\_\_\_\_

Date \_\_\_\_\_