

CREDIT APPLICATION

BE

COMPANY NAME _____

STREET _____ PHONE _____ FAX _____

CITY _____ STATE _____ ZIP _____ CELL _____

INSTALLATION ADDRESS _____

CONTACT _____ EMAIL _____

COMPANY IS A: () CORP, () PARTNERSHIP, () SOLE PROPRIETOR, () LLC FED I.D. # _____

YEARS IN BUSINESS _____ YEARS UNDER CURRENT OWNERSHIP _____ DESCRIPTION OF BUSINESS _____

HAS OWNER OR COMPANY FILED BANKRUPTCY IN THE LAST 10 YEARS? () YES () NO

OWNER(S)_____
(NAME) (TITLE/%OWNERSHIP) (HOME ADDRESS & PHONE) (DATE OF BIRTH) (SOCIAL SECURITY #)_____
(NAME) (TITLE/%OWNERSHIP) (HOME ADDRESS & PHONE) (DATE OF BIRTH) (SOCIAL SECURITY #)_____
(NAME) (TITLE/%OWNERSHIP) (HOME ADDRESS & PHONE) (DATE OF BIRTH) (SOCIAL SECURITY #)**BANK REFERENCES (NEED AT LEAST 2 YEAR HISTORY)**_____
(NAME) (PHONE) (ACCOUNT NUMBER/TYPE) (DATE OPENED) (CONTACT NAME)_____
(NAME) (PHONE) (ACCOUNT NUMBER/TYPE) (DATE OPENED) (CONTACT NAME)

LOAN HISTORY PAST OR PRESENT _____

(BANK) (PHONE) (LOAN NUMBER) (AMOUNT)

TRADE REFERENCES_____
(CO. NAME) (CITY, STATE) (PHONE) (CONTACT NAME) (ACCT. #)_____
(CO. NAME) (CITY, STATE) (PHONE) (CONTACT NAME) (ACCT. #)

CREDIT RELEASE: I hereby authorize the release of all credit information to and consent to the obtaining and use of my consumer credit report by any agency involved in securing funds for the above company, their designee, assigns/potential assigns at anytime, for obtaining credit, and applicable account maintenance. I understand that this information may be transmitted via Internet and/or fax machine. I consent to the photocopying of my drivers license for verification purposes in connection with a commercial lease/financing transaction. I also consent to receiving unsolicited faxes and emails wherein the involved agency will advocate its services.

X _____ X _____ X _____

OWNER SIGNATURE, DATE _____ SIGNATURE, DATE _____ SIGNATURE, DATE _____

DESCRIPTION OF TRUCK OR EQUIPMENT

EQUIPMENT COST _____ TERM _____ MONTHS PURCHASE OPTION _____ #ADV PYMTS _____

VENDOR _____ PHONE _____ FAX _____

ADDRESS _____ CONTACT _____

FAX APPLICATION TO KEY CREDIT CORP. 800-261-7826, VOICE 800-344-9922555 Sun Valley Dr., Suite N-1, Roswell, GA 30076, Website: www.keycreditcorp.com Email: neilw@keycreditcorp.com