



FINANCE APPLICATION

Return to: John Chadwick,
Finance Manager
jchadwick@peteatlanta.com
Fax 770-775-9153

Salesman _____

APPLICANT INFORMATION					
Business Borrower (Company Name):		Phone:		Fed Tax I.D.	
Address:		City:		State:	Zip:
Applicant is: <input type="checkbox"/> Individual <input type="checkbox"/> Limited Liability Company		Years as o/o	Years in Industry	Mo/Yr Incorporated	State Incorporated
<input type="checkbox"/> Partnership <input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp					
1. Applicant Name (Officer of Business or O/O info)		% Owned	Title	Date of Birth	Social Security Number
Address:		City:		State:	Zip:
Office or Home Number	Cell Number		Email Address		
2. Applicant Name (Officer of Business or O/O info)		% Owned	Title	Date of Birth	Social Security Number
Address:		City:		State:	Zip:
Office or Home Number	Cell Number		Email Address		
Home Applicant (Check one) <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other		Market Value		Monthly Payment	
Have you ever filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes		Have you ever had an item repossessed? <input type="checkbox"/> No <input type="checkbox"/> Yes		Are you a defendant in any legal action <input type="checkbox"/> No <input type="checkbox"/> Yes	

Banking Information

Bank Name	Contact Name	City, State	Phone
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Fleet Vehicle/Financing Information

Number of Trucks in Fleet _____

List Fleet Units (Complete fully all units financed in the last 5 years, Attach additional page, if necessary)				
Year/Make/Model	Financed at:	Phone Number	Payment	Balance

Haul Source / Work History

(List all haul source/driving experience for the last 5 years. Most recent first.)

Company	Contact Name	Phone Number	Mo/Yr Started	Position

The undersigned certifies that the above information given for credit purposes is true and correct and authorizes the firm or person this application is made to and any credit bureau or investigative agency to investigate the references, statements or other data listed accompanying this application. The undersigned authorizes all parties contacted to release credit and financial information requested as a part of said investigation.

Applicant #1 signature	Applicant #2 signature	Date
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Application MUST be completed in full signed and dated.