



SOLE PROPRIETOR APPLICANT INFORMATION

APPLICANT NAME: FIRST		MIDDLE		LAST	
SOCIAL SECURITY	DATE OF BIRTH	MARITAL STATUS	SPOUSE'S NAME	SPOUSE'S SOCIAL SECURITY #	
STREET ADDRESS			CITY	STATE	ZIP CODE
PHONE NUMBER	COUNTY	HOW LONG AT PRESENT ADDRESS? YR MO	HOW LONG IN THE AREA? YR MO	HOMEOWNER?	US CITIZEN?
PREVIOUS ADDRESS		CITY	STATE	ZIP CODE	HOW LONG? YR MO
NEAREST RELATIVE NOT LIVING WITH YOU		ADDRESS		PHONE	RELATIONSHIP
HAVE YOU EVER FILED BANKRUPTCY? <input type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN ON REVERSE		ARE YOU A DEFENDANT IN A LEGAL ACTION? <input type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN ON REVERSE		HAVE YOU EVER HAD A REPO? <input type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN ON REVERSE	

EMPLOYMENT/BUSINESS HISTORY

FIRST TIME OWNER OPERATOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	TIME AS OWNER OPERATOR YR MO	TIME AS A CDL DRIVER YR MO	CELL PHONE #		
YOUR BUSINESS NAME OR DBA	EQUIPMENT OWNED TRUCKS TRAILERS	REASON FOR PURCHASE ADD REPLACE OTHER	BUYER TO DRIVE? <input type="checkbox"/> NO <input type="checkbox"/> YES		
TRUCK TO WORK FOR	PHONE CONTACT	LENGTH OF RELATIONSHIP YR MO	TYPES OF HAULS		
PREVIOUS EMPLOYER	PHONE	HOW LONG? YR MO	POSITION HELD		
PREVIOUS EMPLOYER	PHONE	HOW LONG? YR MO	POSITION HELD		
PREVIOUS EMPLOYER	PHONE	HOW LONG? YR MO	POSITION HELD		
NAME OF DRIVER	SOCIAL SECURITY #	PHONE #	CDL #	STATE	DATE
EXPERIENCE YR MO	STREET ADDRESS	CITY	STATE	ZIP	

C0-APPLICANT INFORMATION

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FINANCIAL STATEMENT

ASSETS

LIABILITIES

Deposit Accounts		Value	Credit Cards	Payments	Balance
CHECKING	ACCOUNT #	\$	CREDITOR(S)	MO. PAYMENT(S)	\$
		\$		\$	\$
SAVINGS	ACCOUNT #	\$		\$	\$
		\$		\$	\$
OTHER	ACCOUNT #	\$		\$	\$
		\$		\$	\$

Real Estate	Value	Financed By	Payments	Balance
DESCRIPTION(S)	\$	MORTGAGOR(S)	MO. PAYMENT(S)	\$
	\$		\$	\$
	\$		\$	\$

Trucks, Trailers & Business Equipment	Value	Financed By	Payments	Balance
DESCRIPTION(S)	\$	CREDITOR(S)	MO. PAYMENT(S)	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$

Autos & Personal Equipment	Value	Financed By	Payments	Balance
DESCRIPTION(S)	\$	CREDITOR(S)	MO. PAYMENT(S)	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$

Other Assets	Value	Financed By	Payments	Balance
DESCRIPTION(S)	\$	CREDITOR(S)	MO. PAYMENT(S)	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$

TOTAL ASSETS	\$	TOTAL LIABILITIES	\$	\$
			NET WORTH	\$

NOTES (EXPLANATION OF BANKRUPTCY, LEGAL ACTION, REPO, ETC.)

Applicant: _____ **Title:** _____ **Date:** _____