

EQUIPMENT FINANCE APPLICATION

1. BUSINESS & CUSTOMER INFORMATION

BUSINESS NAME			BUSINESS PHONE #		EMAIL ADDRESS	
BUSINESS ADDRESS				CITY		STATE
APPLICANT'S NAME (AS IT APPEARS ON DRIVER'S LICENSE)				SOCIAL SECURITY NUMBER	DATE OF BIRTH	EIN#
HOME ADDRESS				CITY		STATE
RENT OR OWN HOME	YEARS AT ADDRESS	HOME PHONE #		MOBILE#		% OWNERSHIP
FORMER ADDRESS (IF LESS THAN 5 YEARS AT PRESENT)				CITY		STATE
YEARS AT ADDRESS	MARITAL STATUS (CIRCILE ONE) SINGLE MARRIED DIVORCED		SPOUSE'S NAME		SPOUSE'S MOBILE #	
CO- APPLICANT'S NAME (AS IT APPEARS ON DRIVER'S LICENSE)			SOCIAL SECURITY NUMBER	DATE OF BIRTH	MARITAL STATUS (CIRCILE ONE) SINGLE MARRIED DIVORCED	
HOME ADDRESS				CITY		STATE
RENT OR OWN HOME	YEARS AT ADDRESS	HOME PHONE #		MOBILE#		% OWNERSHIP
Has any applicant ever filed Bankruptcy? NO YES If YES, please explain below.			Is any applicant a defendant in any legal action? NO YES If YES, please explain below.		Has any applicant ever had an item repossessed? NO YES If YES, please explain below.	

EXPLANATION:

THIS TRUCK IS A: (CHECK ONE) FIRST TRUCK PURCHASE REPLACEMENT or UPGRADE ADDITIONAL TRUCK OTHER					TOTAL # OF TRUCKS OWNED
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2. EXPERIENCE

# OF YEARS WITH CDL	# OF YRS AS O/O	TRUCK TO WORK FOR (LIST COMPANY)		CONTACT	PHONE#
COMPANY'S ADDRESS				CITY	STATE
					ZIP

3. TRUCK USAGE

ROUTE (CHECK ONE) LOCAL REGIONAL LONG HAUL			HAULING (CHECK ALL THAT APPLY) DRY GOODS REEFER FLAT BED HAZARDOUS OTHER			DO YOU HAVE YOUR OWN AUTHORITY?
EXPECTED WEEKLY GROSS REVENUE		EXPECTED MILES/WEEK	EXPECTED \$/MILE	CDL#	STATE	EXP. DATE
WILL PURCHASER BE DRIVING THIS TRUCK? NO YES If NO, provide driver information->			DRIVER'S NAME (AS IT APPEARS ON DRIVER'S LICENSE)			RELATIONSHIP
DRIVER'S ADDRESS				CITY		STATE
DRIVER'S PHONE #				# OF YEARS WITH CDL	CDL#	STATE
						EXP. DATE

4. EMPLOYMENT HISTORY FOR PAST FIVE YEARS (PRESENT EMPLOYER FIRST)

NAME AND ADDRESS OF COMPANY		PHONE NUMBER	POSITION HELD	HOW LONG
NAME AND ADDRESS OF COMPANY		PHONE NUMBER	POSITION HELD	HOW LONG

The undersigned acknowledges the statements on this application are true, correct and accurate to the best of my knowledge, and the information contained herein may be used by Sharp Financial Services, LLC (Sharp) to make credit decisions. The undersigned authorizes Sharp and its affiliates to obtain any consumer and/or business information from banks, credit unions, as well as other credit reporting services, and authorizes them to furnish such information to Sharp. The undersigned acknowledges that this signed application is an application for credit only, and the final terms of the financing agreement will be based on the documents themselves. No commitment exists until the Applicant/Joint Applicant(s) receives the same in writing from Sharp.

APPLICANT (PRINT) _____ SIGNATURE _____ DATE ____ / ____ / ____

CO-APPLICANT (PRINT) _____ SIGNATURE _____ DATE ____ / ____ / ____