

BILTMORE LEASING CORP.

TRUCK FINANCE APPLICATION

1. BUSINESS & CUSTOMER INFORMATION

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

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
						ZIP
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 BILTMORE LEASING CORP, its heirs & assigns to make credit decisions. The undersigned authorizes BILTMORE and others authorized under this consent 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. 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.

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

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

2415 E. CAMELBACK SUITE 700 PHOENIX AZ 85016 PHONE 602-840-0404
 JAY BOSLIN'S CELL 602-750-8070