

Commercial Lease & Finance Corp.

7825 Cove Ridge Dr.

Hixson, TN, 37343

Phone: 800-596-2777 Fax: 800-474-0404

FINANCE APPLICATION**PERSONAL APPLICANT INFORMATION**

Applicant Name: First / Middle / Last			<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC	Date of Birth:
Social Security Number:	Marital Status:	Spouse Name & Social Security Number:		
Street Address	City/County	State	Zip Code	
How long there? Years:	Time in the area? Years:	Homeowner? <input type="checkbox"/> No <input type="checkbox"/> Yes	Phone Number:	Fax Number:
Have you ever filed for Bankruptcy?			Have you ever had a vehicle repossessed?	

BANK INFORMATION – If more than one checking /savings account please list

Bank	Acct#	Contact	Phone	How Long	CK	SV	CD
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bank	Acct#	Contact	Phone	How Long	CK	SV	CD
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EQUIPMENT LOANS/LEASES - Where your truck(s) and trailer(s) are financed

Company	Phone	Contact	Account #
Company	Phone	Contact	Account #

EMPLOYMENT - No minimum driving experience required

Years Driving Experience:	Years as Owner Operator:	Business Phone:	Cell Phone:
Your Current Business Name or DBA:		# of Trucks/Trailers Owned: Trucks: Trailers:	Reason: <input type="checkbox"/> Replacement <input type="checkbox"/> Additional Buyer to drive: <input type="checkbox"/> No <input type="checkbox"/> Yes
Business Address	City	State	Zip Code
Time In Business: Years: Months:			
Company to Haul for:	How long there? Years: Months:	Phone Number:	Contact Name:
Previous Hauling Reference:	How long there? Years: Months:	Phone Number:	Contact Name:

EQUIPMENT INFORMATION

DEALER NAME/PHONE NUMBER: _____	
EQUIPMENT DESCRIPTION/COST: _____ \$ _____	<input type="checkbox"/> NEW <input type="checkbox"/> USED Year if used: _____
TERM REQUESTED: <input type="checkbox"/> 24 MOS <input type="checkbox"/> 36 MOS <input type="checkbox"/> 48 MOS <input type="checkbox"/> 60 MOS PURCHASE OPTION: <input type="checkbox"/> 10% <input type="checkbox"/> \$1.00	
The undersigned individual who is either a principal, personal guarantor or a sole proprietor of the credit applicant, recognizing that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, hereby consents and authorizes Commercial Lease & Finance Corp. or its designee the use of a consumer credit report on the undersigned, from time to time as may be needed, as well as the release of any and all information requested for the purpose of granting business credit. A Photocopy of this release will act as an original.	
BY: _____	TITLE: _____
BY: _____	TITLE: _____