

PTEC, LLC DBA PATRIOT TRANSPORTATION EQUIPMENT

5819 WEST BUCKEYE ROAD PHOENIX, AZ 85043
Telephone: 602-442-7832 • Fax: 602-442-9610 • Toll Free: 866-370-7832
MAILING ADDRESS P.O. BOX 93130, PHX., AZ. 85070-3130

CREDIT APPLICATION

APPLICANT(S): _____ D.O.B.: _____

COMPANY: _____

BILLING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE #: _____ CONTACT PERSON: _____ TITLE: _____

NATURE OF BUSINESS: _____ TYPE: Prop. ___ LLC ___ Corp. ___ Partnership ___ Years. In Business ___
Of Trailers you own ___ # of Tractors you own ___ # of years Driving Experience ___ # of years as Owner Operator: ___

DESCRIPTION OF EQUIPMENT:

LIST PRICES (not including tax): _____ REQUESTED TERM: ___ 12 Mo. ___ 24 Mo. ___ 36 Mo. ___ 48 Mo. ___ 60 Mo. Buy-out: ___ 10% ___ \$1.00

ITEM(s) to be invoiced: _____

PERSONAL INFORMATION ON OFFICERS, PARTNERS, OR GUARANTORS:

NAME: _____ TITLE: _____ SOCIAL SECURITY NO: _____

HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ HOME PH. #: _____

D.O.B: _____ Commercial Driver License #: _____ Exp Date: _____

Have you ever filed for Bankruptcy? Yes ___ No ___ Have you had any Repossessions? Yes ___ No ___

NAME: _____ TITLE: _____ SOCIAL SECURITY NO: _____

HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ HOME PH. #: _____

D.O.B: _____ Commercial Driver License #: _____ Exp Date: _____

Have you ever filed for Bankruptcy? Yes ___ No ___ Have you had any Repossession? Yes ___ No ___

BANK REFERENCES:

NAME OF BANK/BRANCH CITY/STATE CHKG. ACCT#: _____ LOAN ACCT. #: _____

PHONE #: _____ CONTACT OFFICER: _____

NAME OF BANK/BRANCH CITY/STATE CHKG. ACCT #: _____ LOAN ACCT. #: _____

PHONE #: _____ CONTACT OFFICER: _____

TRADE REFERENCES:

NAME OF SUPPLIER CITY/STATE ACCT.#: _____ PHONE NO. CONTACT OFFICER

NAME OF SUPPLIER CITY/STATE ACCT.#: _____ PHONE NO. CONTACT OFFICER

VENDOR:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ E-MAIL: _____

CONTACT: _____ PHONE: _____ DATE: _____

The undersigned certifies that the above information given for credit purposes is true and correct and authorizes the firm or person to whom this application is made (or their assignee) and any credit bureau or other investigative agency to investigate the references, statements or other data listed or accompanying this application. The undersigned authorizes all parties contacted to release credit and financial information requested as part of said investigation. By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations provides written instruction to PTEC, LLC or its assignee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A photostat or facsimile copy of this authorization shall be valid as the original. By signature below, I/We affirm my/our identify as the respective individual/s identified in the above application.

AUTHORIZED SIGNATURE TO RELEASE INFORMATION: _____ DATE: _____

CO-APPLICAN(S) SIGNATURE: _____ DATE: _____

(use additional space on back if necessary, all applicants or MAJORITY shareholders must be listed)