

# Republic Capital Corporation

## Commercial Credit Request    PH 859-342-8600    FAX 859-342-8606

REP	APPLICATION TAKEN FROM <input type="checkbox"/> APPLICANT <input type="checkbox"/> SUPPLIER	ADDRESS/PHONE/CONTACT	TIME	DATE
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### GENERAL INFORMATION

PROPRIETORSHIP?	PARTNERSHIP?	CORPORATION (C) OR (S) OR (LLC)	YEARS IN BUSINESS	DATE INCORPORATED	WHAT STATE
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APPLICANT DBA

ADDRESS

CITY/STATE/ZIP	COUNTY	HOW LONG?
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FORMER ADDRESS (IF LESS THAN 5 YRS.)

BUSINESS PHONE & FAX	HOME PHONE	CELL PHONE	SSN/FED ID	DOB
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CO-APPLICANT / SPOUSE	SSN	DOB
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IF CORPORATION PRINCIPALS NAMES/ADDRESS/SSN PRESIDENT OR LLC MANAGING MEMBER:	STOCK %
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SECRETARY/TREASURER OR LLC MEMBERS:	STOCK %
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ANY CREDIT PROBLEMS? <input type="checkbox"/> YES <input type="checkbox"/> NO	EXPLANATION
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NEAREST RELATIVE:	ADDRESS/PHONE #	RELATIONSHIP
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### \*\*ATTACH SALES ORDER\*\*                      EQUIPMENT PURCHASE                      \*\*ATTACH SALES ORDER\*\*

COLLATERAL:	YEAR	MAKE	MODEL	SELLING PRICE \$	DOWN PAYMENT \$	TRADE IN \$	AMOUNT TO FINANCE \$
NEW / USED						DESC:	
ENGINE	TRANS	SLEEPER	WHEELS	LOAN	LEASE	DELIVERY DATE	TERM / # MONTHS

TAX EXEMPT?	ICC #	ADDITION?	REPLACEMENT?	PAYMENTS ADV/RESIDUAL	PAYMENTS DESIRED/QUOTED
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NEW EQUIPMENT WILL BE LEASED ON WITH - PHONE & CONTACT:	PREVIOUSLY OWNED/LEASED: # TRUCKS _____ # TRAILERS _____	CURRENTLY OWNED/LEASED: # TRUCKS _____ # TRAILERS _____
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PRESENT TRUCKS & TRAILERS FINANCED WITH:	PHONE/ADDRESS/ACCOUNT #
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PREVIOUS TRUCKS & TRAILERS FINANCED WITH:	PHONE/ADDRESS/ACCOUNT #
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GARAGE ADDRESS / TITLING ADDRESS / PLATING ADDRESS - IF OTHER THAN ABOVE

SUPPLIERS - FUEL / TIRES: ADDRESS/PHONE/CONTACT

### MAIN ACCOUNTS / EMPLOYMENT / TRUCK USAGE

COMPANY/ADDRESS/PHONE	HOW LONG?	YRS EXPERIENCE	YRS O/O EXPERIENCE	RADIUS	BASE STATE
COMPANY/ADDRESS/PHONE	HOW LONG?	PRODUCTS HAULED			MILEAGE AMT/ % OF LOAD
COMPANY/ADDRESS/PHONE	HOW LONG?	WHEN PAID	GROSS PER MONTH	CDL LICENCE #	ISSUE STATE

DRIVER (IF NOT PURCHASER) - NAME/ADDRESS/SSN/CDL #/DOB:

### INSURANCE INFORMATION

INSURANCE DESIRED?	CREDIT LIFE	LIABILITY	PHYSICAL DAMAGE	BOBTAIL/DEADHEAD	CARGO	DOWNTIME	DRIVER BENEFIT
TRAFFIC TICKETS/ACCIDENTS/LOSSES - NAME/ADDRESS/PHONE # OF AGENT							

# Republic Capital Corporation / Credit Application / Statement

APPLICANT	ADDRESS	STATEMENT DATE
BANKS	CITY / STATE	PHONE & CONTACT
ACCOUNT #'S	CKG	SVGS
		OTHER

ASSETS		LIABILITIES	
CASH ON HAND / IN BANKS:		ACCTS PAYABLE / MONTHLY CHARGES	
IN BANKS: \$	ON HAND: \$	\$	\$
ACCOUNTS RECEIVABLES		NOTES	
FROM _____			
SVGS / CD'S / IRA'S		CREDIT CARDS	
WHERE _____			
LIST ALL REAL ESTATE		MORTGAGE(S)	
COST \$ _____ WHEN _____			
DESCRIPTION _____			

TRUCKS & TRAILERS (Describe)	FINANCED BY (Where)

AUTOS & EQUIPMENT (Describe)	FINANCED BY (Where)
<b>TOTAL ASSETS</b>	<b>TOTAL LIABILITIES</b>

<b>INCOME STATEMENT</b>	<b>NET WORTH</b>
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ACCOUNTANT NAME & ADDRESS:						
FROM	TO	BUSINESS GROSS INCOME	OTHER INCOME	DEPRECIATION	EXPENSES	OPERATING PROFIT

\_\_\_\_\_

BANK AND/OR LENDER NAME

The signature(s) below authorize the release of information to Republic Capital Corporation, its affiliates, assigns, or participating lenders, necessary to process my / our credit application. This includes, but is not limited to information concerning my / our checking accounts, savings accounts, deposit accounts, loan and lease histories, for both open and paid accounts, personal and commercial. The undersigned has given a statement for the purpose of being granted credit and warrants its truth and accuracy. We are applying for joint credit.

A photocopy or fax copy of this application will be considered as valid as the original.

**APPLICANT SIGNATURE**

**CO-APPLICANT SIGNATURE**

**X** \_\_\_\_\_

**X** \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

HOME ADDRESS / SSN: \_\_\_\_\_

HOME ADDRESS / SSN: \_\_\_\_\_