



STATEMENT OF CONSENT

APPLICATION DATE

I CERTIFY THAT THE INFORMATION PROVIDED BY ME IS CORRECT. I ALSO UNDERSTAND THAT YOU WILL BE CHECKING WITH CREDIT REPORTING AGENCIES. I AUTHORIZE AN INVESTIGATION OF MY CREDIT AND EMPLOYMENT HISTORY AND THE RELEASE OF INFORMATION ABOUT MY CREDIT EXPERIENCE. PLEASE INITIAL BELOW TO INDICATE THAT YOU HAVE RECEIVED A COPY OF OUR PRIVACY NOTICE AND AGREE TO ALL OF THE ABOVE. YOUR CREDIT APPLICATION IS GOING THROUGH A SECURE WEBSITE AND YOUR IDENTITY IS SAFE TO COMPLETE THE APPLICATION, A VALID EMAIL ACCOUNT OR VALID DRIVER'S LICENSE WILL BE REQUIRED TO VERIFY AUTHENTICITY OF THE INDIVIDUALS APPLYING FOR CREDIT AND TO PROTECT INDIVIDUALS FROM IDENTITY THEFT. BY SIGNING, THE APPLICANT(S) SUBMITS THE BELOW INFORMATION FOR THE PURPOSE OF OBTAINING CREDIT AND REPRESENTS THAT ALL SUCH INFORMATION IS TRUE AND ACCURATE. EACH OF THE UNDERSIGNED PERSON(S) AUTHORIZE JIM'S PACIFIC GARAGES, INC. AND/OR ITS ASSIGNEES/DESIGNEES PERMISSION TO OBTAIN CONSUMER CREDIT REPORTS RELATING TO THEIR INDIVIDUAL CREDIT HISTORY.

I agree to the above statement

SIGNATURE

(INITIAL HERE)

ARE YOU CURRENTLY WORKING WITH A SALESPERSON?

VEHICLE INFORMATION

AGENT

STOCK NUMBER

CONDITION

YEAR

MAKE

MODEL

PRICE

VIN

DOWN PAYMENT

YOUR CONTACT INFORMATION

Name As It Appears on Drivers License

FIRST NAME

MIDDLE NAME

LAST NAME

DRIVER'S LICENSE

WORK PHONE

PHONE

EMAIL

SOCIAL SECURITY NUMBER

MARITAL STATUS

DATE OF BIRTH

DO YOU HAVE A CDL?

HOW LONG HAVE YOU HAD A CDL?



PHYSICAL ADDRESS INFORMATION

STREET ADDRESS

CITY

STATE

ZIP CODE

HOUSING INFORMATION

DO YOU RENT OR OWN YOUR HOME, OR OTHER?

LANDLORD / MORTGAGE HOLDER

RENT / MORTGAGE MONTHLY AMOUNT

MORTGAGE BALANCE

Time at Current Residence

YEAR

MONTH

PREVIOUS RESIDENCE (IF LESS THAN 5 YEARS AT CURRENT RESIDENCE...)

STREET ADDRESS

CITY

STATE

ZIP CODE

How long at Previous Residence

YEAR

MONTH

BANKING INFORMATION

NAME OF BANK

ACCOUNT TYPE

CITY

STATE

PHONE NUMBER



BUSINESS INFORMATION

IS THIS LOAN TO BE IN UNDER A COMPANY NAME?

BUSINESS NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

PHONE

FEIN

YEARS IN BUSINESS

HAULING REFERENCES

NAME OF COMPANY

CONTACT AT COMPANY

PHONE NUMBER

COMMODITY HAULED

HAULING LOCAL / NATIONWIDE?

PRIOR TRUCK PURCHASES

FIRST TIME BUYER?

HAVE YOU EVER FINANCED?

IS PURCHASE A REPLACEMENT OR ADDITION?

YEAR

MAKE

MODEL

FINANCED BY

DATE FINANCED

HAVE YOU EVER FILED BANKRUPTCY?

ARE YOU A DEFENDANT IN ANY LEGAL ACTION?

HAVE YOU HAD ANY ITEM REPOSSESSED?



IF YES, PLEASE EXPLAIN BELOW

HOW MANY TRUCKS DO YOU OWN

MC#