

Savannah Freightliner Sterling
 Augusta Freightliner Sterling
 301 O'Leary Road, Savannah, GA 31407
 (912) 964-8574 ext 203
 (912) 964-9608 FAX

Personal Applicant Information

FIRST NAME MIDDLE INITIAL LAST NAME SOCIAL SECURITY NUMBER DATE OF BIRTH

STREET ADDRESS CITY COUNTY STATE ZIP CODE

PHONE NUMBER HOW LONG THERE HOME OWNER?
Years: Yes / No

PREVIOUS ADDRESS CITY STATE ZIP COD TIME THERE?
Years:

Have you ever filed bankruptcy? Are you a defendant in a legal action? Have you ever had a repossession?
Yes / No Explain Below Yes / No Yes / No

Employment Information

First Time Owner/Operator? Time as Owner/Operator: Time as a driver: Cell Phone Number:
Years: Months: Years Months:

Your Business Name or DBA: FED ID# Number of trucks owned Reason for purchase:
Trucks Trailers: Additional Unit/Replacement

Future Haul Reference: Phone Number Contact Person How long there? Position Held:
Years: Months:

Current Haul Reference: Phone Number Contact Person How long there? Position Held:
Years: Months:

Past Haul Reference: Phone Number Contact Person How long there? Position Held:
Years: Months:

Financial Information

Name of Bank: Branch: Contact/Phone Number Account Number:

Previous Truck Credit With: Phone Number: Year & Make of Truck: Date Paid Off:

Previous Truck Credit With: Phone Number: Year & Make of Truck: Date Paid Off:

I/we hereby authorize you and/or your agents or financial institutions whom you deem necessary, to investigate my/our credit worthiness and will provide financial statement and, tax returns as you may deem necessary. I/we WARRANT and SWEAR that the information submitted herein is true and correct and hereby authorize the references contained herein to release any necessary information. I/we further authorize any Bank listed to release credit rating information, including account balances, date account opened and status for all checking, savings and loan accounts the I/we hold.

Authorization: _____ Date: _____