

# Milam's Truck Sales - Credit Application

Partnership (  )    Proprietorship (  )    Nonprofit Org. (  )    Corporation (  )

Corporation Tax ID #, If Applicable: \_\_\_\_\_

**Primary Applicant**    Full Name: \_\_\_\_\_

Present Address: \_\_\_\_\_    How Long? \_\_\_\_\_

City: \_\_\_\_\_    ST: \_\_\_\_\_    Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_    Social Security #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_    Residence Phone: \_\_\_\_\_

Own/Rent? \_\_\_\_\_    Mortgage/Rent Paid To: \_\_\_\_\_

**Spouse**    Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_    Social Security #: \_\_\_\_\_

**Former Address**    Address \_\_\_\_\_

City: \_\_\_\_\_    ST: \_\_\_\_\_    Zip: \_\_\_\_\_

**Corporation Information**    Name: \_\_\_\_\_

Incorporated in what state? \_\_\_\_\_    Date of Incorporation: \_\_\_\_\_

Date in Business: \_\_\_\_\_

Principal: \_\_\_\_\_    Age: \_\_\_\_\_

Principal Title \_\_\_\_\_    % Owned \_\_\_\_\_

Principal: \_\_\_\_\_    Age: \_\_\_\_\_

Principal Title \_\_\_\_\_    % Owned \_\_\_\_\_

**Nearest Relatives Not At Above Address**

Name: \_\_\_\_\_    Address \_\_\_\_\_

City: \_\_\_\_\_    ST: \_\_\_\_\_    Zip: \_\_\_\_\_

Phone: \_\_\_\_\_    Relation: \_\_\_\_\_

Name: \_\_\_\_\_    Address \_\_\_\_\_

City: \_\_\_\_\_    ST: \_\_\_\_\_    Zip: \_\_\_\_\_

Phone: \_\_\_\_\_    Relation: \_\_\_\_\_

**Employment - Past & Present - Five Years**

Company Name: \_\_\_\_\_    Contact: \_\_\_\_\_

Address: \_\_\_\_\_    Phone: \_\_\_\_\_

City: \_\_\_\_\_    ST: \_\_\_\_\_    Zip: \_\_\_\_\_

Position: \_\_\_\_\_    How Long? \_\_\_\_\_

Company Name: \_\_\_\_\_    Contact: \_\_\_\_\_

Address: \_\_\_\_\_    Phone: \_\_\_\_\_

City: \_\_\_\_\_    ST: \_\_\_\_\_    Zip: \_\_\_\_\_

Position: \_\_\_\_\_    How Long? \_\_\_\_\_

How Long As An Owner/Operator? \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_

**Purchaser's Financial & Current Credit Statement**

Savings Account	Bank:	Account #:
	Phone:	

Checking Account	Bank:	Account #:
	Phone:	

	Bank:	Account #:
	Phone:	

Asset:	Value:	Pmt. Amount	Amt. Owed
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Asset:	Value:	Pmt. Amount	Amt. Owed
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Asset:	Value:	Pmt. Amount	Amt. Owed
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Have You Filed Bankruptcy in the last 10 years?

Any Items Repossessed?

**Truck You Are Interested In?**

Year:	Make:	Model:
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Stock #	Color:
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Year:	Make:	Model:
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Stock #	Color:
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Amount to be used as a Down Payment:

Applicant Signature:	Date:
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Co-Applicant Signature:	Date:
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