

LUBBOCK TRUCK SALES, INC.

CREDIT APPLICATION

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|----------|---------------------|
| SALESMAN | DATE OF APPLICATION |
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PERSONAL INFORMATION

| | | | | |
|------------------------|-------|---------------------------|-----------------------------------|-------------------|
| FIRST NAME | M.I. | LAST NAME | | |
| SOCIAL SECURITY NUMBER | CDL # | DATE OF BIRTH | MARRIED SEPARATED UNMARRIED | NO. OF DEPENDENTS |
| ADDRESS | | PHONE NUMBER | | |
| CITY, STATE, ZIP CODE | | HOW LONG AT THIS ADDRESS? | | |

| | | |
|-------------|-----------------------------------|-----------------------------------|
| OWN RENT | MORTGAGE COMPANY OR LANDLORD NAME | MORTGAGE OR LANDLORD PHONE NUMBER |
|-------------|-----------------------------------|-----------------------------------|

| | |
|---|-----------|
| FORMER ADDRESS (IF LESS THAN 5 YEARS) CITY, STATE, ZIP CODE | HOW LONG? |
|---|-----------|

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|---|---------------------|
| BUSINESS NAME FOR TITLING PURPOSES, IF APPLICABLE (PROPRIETORSHIP PARTNERSHIP CORPORATION) | BUSINESS TAX ID NO. |
|---|---------------------|

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|--|-----------------------|
| BUSINESS ADDRESS (IF DIFFERENT FROM ABOVE) | BUSINESS PHONE NUMBER |
|--|-----------------------|

| | | | |
|---------------------------------------|---------|-----------|--------------|
| NEAREST RELATIVES NOT LIVING WITH YOU | ADDRESS | PHONE NO. | RELATIONSHIP |
|---------------------------------------|---------|-----------|--------------|

SELF

SELF

SPOUSE

SPOUSE

| | | | |
|---------------------------------|-----------------------------------|--|---|
| HAVE YOU EVER TAKEN BANKRUPTCY? | ARE YOU SUBJECT TO ANY TAX LIENS? | ARE YOU A DEFENDANT IN ANY LEGAL ACTION? | HAVE YOU EVER HAD ANY ITEM REPOSSESSED? |
| NO YES- EXPLAIN BELOW | NO YES- EXPLAIN BELOW | NO YES- EXPLAIN BELOW | NO YES- EXPLAIN BELOW |

EXPLANATION:

COMPLETE THIS SECTION ONLY IF THIS IS A JOIN APPLICATION WITH YOUR SPOUSE, OR IF YOU ARE RELYING ON YOUR SPOUSE'S INCOME OR ASSETS AS A BASIS FOR REPAYMENT OF THE CREDIT REQUESTED, OR IF YOU RESIDE IN A COMMUNITY PROPERTY STATE.

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|-----------------------------------|------------------------|---------------|
| SPOUSE'S NAME (FIRST, M.I., LAST) | SOCIAL SECURITY NUMBER | DATE OF BIRTH |
|-----------------------------------|------------------------|---------------|

| | | |
|-------------------|---------------|-----------|
| SPOUSE'S EMPLOYER | POSITION HELD | HOW LONG? |
|-------------------|---------------|-----------|

EMPLOYMENT HISTORY FOR THE PAST FIVE YEARS (PRESENT OR LAST EMPLOYER FIRST)

| | | | |
|--------------------|-----------|---------------|-----------|
| 1. NAME OF COMPANY | PHONE NO. | POSITION HELD | HOW LONG? |
| 2. NAME OF COMPANY | PHONE NO. | POSITION HELD | HOW LONG? |
| 3. NAME OF COMPANY | PHONE NO. | POSITION HELD | HOW LONG? |

TRUCK OWNERSHIP AND USAGE

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|-----------------------|---|---|---------------------|
| PREVIOUS TRUCK OWNER? | HOW MANY _____ TRUCKS _____ TRAILERS | IF FINANCED, NAME AND CITY OF LENDER(MOST RECENT) | PURCHASER TO DRIVE? |
| NO YES | | | NO YES |

| | | |
|---|---------|--------------|
| TRUCK TO WORK FOR- COMPANY NAME, CITY AND STATE | CONTACT | PHONE NUMBER |
|---|---------|--------------|

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|--|---------|--------------|
| ADDITIONAL HAUL (IF APPLICABLE)- COMPANY NAME, CITY AND | CONTACT | PHONE NUMBER |
|--|---------|--------------|

DRIVER INFORMATION, IF DIFFERENT FROM APPLICANT

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|-----------------------------------|---------|-----------------------|
| DRIVERS NAME (FIRST,, M.I., LAST) | ADDRESS | CITY, STATE, ZIP CODE |
|-----------------------------------|---------|-----------------------|

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|------------------------|--------------|------------|-----------------------------------|
| SOCIAL SECURITY NUMBER | PHONE NUMBER | CDL NUMBER | PREVIOUS EMPLOYER- NAME & PHONE # |
|------------------------|--------------|------------|-----------------------------------|

