



CUSTOMER

Company/Owner Name* _____ Trade Style/DBA _____
For individuals use full name, first and last

Business Address _____ City _____ State _____ Zip _____
No PO/APO

Garage Address _____ City _____ State _____ Zip _____

Phone Number _____ Federal Tax ID/Social Security # _____

Legal Entity: Corporation Partnership Sole Proprietor S-Corp LLC LLP Non-Profit Government

State of Formation _____ Date Established _____ Date of Birth _____ Titling State _____
If a business If owner/operator

Primary Business Vocation: _____ # of Medium Duty Trucks _____ # of Heavy Duty Trucks _____ # of Trailers _____

Number of years as owner operator/ownership: _____ Number of years driving experience: _____ Hazmat Y/N: _____

GUARANTOR / CO-BORROWER

Name* _____ Title _____ Personal Corporate
Full name with M.I.

Home Address _____ City _____ State _____ Zip _____

Date of Birth _____ Federal Tax ID/Social Security # _____ Phone _____

Email Address _____

Name* _____ Title _____ Personal Corporate
Full name with M.I.

Home Address _____ City _____ State _____ Zip _____

Date of Birth _____ Federal Tax ID/Social Security # _____ Phone _____

Email Address _____

EQUIPMENT DETAILS

Equipment to Finance: Heavy/Medium Duty: _____ Truck/Tractor/Trailer/Bus/Other: _____ Body: _____ Quantity: _____

New/Used: _____ Year: _____ Make: _____ Model: _____ Miles: _____ Glider Y/N: _____

Term: _____ Loan/Lease: _____ Down Payment: _____

Equipment to Trade-in: Heavy/Medium Duty: _____ Truck/Tractor/Trailer/Bus/Other: _____ Body: _____ Quantity: _____ Year: _____

Make: _____ Model: _____ Lender: _____ VIN: _____ Trade Allowance \$: _____ Payoff \$: _____

Term: _____ Loan/Lease: _____

HAUL SOURCE

Business	Material Hauled	Start Date	Contact Name	Phone	Income (Mo.)	Miles/Year
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Haul references should not include yourself or your business

FINANCING

Current or previous financing of trucks, tractors and trailers only						
Lender	Acct #	Contact Name	Phone	City	State	Zip
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

*For individuals use full legal name (first, middle (name or initial) and last) exactly as it appears on government issued driver's license (including hyphens, spaces and suffixes). The following authorization(s) shall apply to this application and subsequently for the purposes of update, renewal or extension of such credit and for reviewing or collecting the resulting account. A photostatic or facsimile copy of this authorization shall be valid as the original. The Business and Personal Authorizations set forth below are granted to BMO Harris Bank N.A. or its designee (and any affiliates, assignees or potential assignees thereof, collectively "BMO Harris") and any unaffiliated bank, financial institution or other potential lender or lessor to which this Application is referred (collectively with BMO Harris, "Financing Source").

BUSINESS Credit Information: Authorization for Disclosure. Applicant hereby authorizes the release of credit information to Financing Source from any source including credit bureau reporting agencies and applicant's Bank, and further authorizes BMO Harris to refer this application and share such information with any other Financing Source. I hereby represent that all of the information contained in this credit application is true, correct and complete. Applicant hereby authorizes Financing Source to execute and file any UCC financing statements in its name upon approval of the application.

PERSONAL Credit Information: Authorization for Disclosure. By signing below, the undersigned individual ("Applicant") who is either a principal of the credit applicant or a personal guarantor of the obligations, authorizes the release of credit information to Financing Source from any source including credit bureau agencies, and further authorizes BMO Harris to refer this application and share such information with any other Financing Source. A consumer report may be requested in connection with this application and, upon written request, Applicant will be informed whether or not a consumer report was requested, and if such report was requested, provided with the name and address of the consumer reporting agency that furnished the report.

By (Signature) **X** _____
Authorized Representative of Credit Applicant

Title _____
Please Print

Name _____ Date _____
Please Print

Signature **X** _____
An Individual

Name _____ Date _____
Please Print Name

Signature **X** _____
An Individual

Name _____ Date _____
Please Print Name

ECOA NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law is the Bureau of Consumer Financial Protection, 1700 G Street NW, Washington DC 20006 and also the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580. If your application for business credit is denied or condition-ally approved, you have the right to a written statement of the specific reasons for the denial or the conditional approval. To obtain the statement, please contact BMO Harris Bank N.A. at 300 E. John Carpenter Freeway Suite 500, Irving TX, 75062 within 60 days from the date you are notified of such denial or condition. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Establishing a relationship with BMO Harris: To help the United States Government fight terrorism and money laundering, it is BMO Harris' policy to request information that identifies each person or business that establishes a relationship with us. Therefore, for businesses, we will ask for your business name, street address and taxpayer identification number. For individuals, we will ask for your name, street address, date of birth and Social Security number. We may also ask to see identifying documents. Thank you for your cooperation.