

Piedmont Equipment Leasing

**Truck & Trailer
Application**

**122 Cardinal Dr. Ext., Ste 104
Wilmington, NC 28405
800-762-9731 910-397-8741 - Fax**

**Date: _____
Taken by: _____**

BUSINESS INFORMATION

Business Legal Name:		Time in Business Under Current Ownership:	Federal ID Number:
Business Mailing Address:		City/County	State Zip
Type of Ownership: <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship	<input type="checkbox"/> LLC <input type="checkbox"/> Corporation	Business Phone Number: ()	Business Fax Number: ()
State of Incorporation:		Year of Incorporation:	Mobile Number: () Business E-Mail:

PRINCIPAL INFORMATION (100% Ownership disclosure required.)

Name (First-Middle-Last)	Date of Birth	Title	% Ownership:	SSN:
Present Address:	City/County	State	Zip	Home Phone Number: ()
Other Owner/Guarantor:	Title:	Address:	% Ownership:	SSN:

HAULING INFORMATION

What is hauled?:	Where do you haul?:
Who do you haul for?:	Contact: Phone Number: ()
Presently in your fleet: _____ # Trucks _____ # Trailers	State you will tag in:

BANK/CHECKING INFORMATION (If checking acct. less than 2 years; provide previous acct. number/bank)

Bank	Phone	Contact	Acct #	How Long	CK	SV
Bank	Phone	Contact	Acct #	How Long	CK	SV

EQUIPMENT LOANS/LEASE (Open or Paid)

Company Name:	Contact:	Phone Number: ()	Equipment:
Company Name:	Contact:	Phone Number: ()	Equipment:

TRADE REFERENCES

Name:	Contact:	Phone: ()	Name:	Contact:	Phone: ()
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EQUIPMENT INFORMATION

Vendor Name: _____ Vendor Phone Number: () _____

Address: _____ Contact: _____

Equipment Description: _____ New or Used Equipment Cost: \$ _____

Where will the equipment be located when not in use?: _____

Term Requested: 24MOS 36MOS 48MOS 60MOS

Applicant warrants all credit and financial information submitted to Piedmont Equipment Leasing (hereafter referred to as PEL) and/or its assignees to be true and accurate and hereby authorizes all banking institutions, income tax reporting agencies and credit reporting agencies to release necessary information via telephone, mail, Internet or facsimile as requested for purposes of making a credit decision. The undersigned individuals specifically authorize PEL and/or its assignees to obtain personal credit bureau reports and/or personal and business income tax transcripts for the making, extension or renewal of this credit decision or collection of the resulting account. A fax or photocopy of this authorization shall be valid as the original.

_____ Signature	_____ Print Name	_____ Date
_____ Signature	_____ Print Name	_____ Date