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APPLICATION FOR FINANCE

APPLICANT INFORMATION							
COMPANY NAME:				DBA:			
COMPANY ADDRESS:				CITY:	STATE:	ZIP CODE:	
CONTACT PERSON:	TITLE:	PHONE:	FAX:	CELL:			
E-MAIL ADDRESS:		FEDERAL TAX ID NUMBER:		DUN & BRADSTREET #:			
BUSINESS TYPE							
TYPE OF BUSINESS: <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/> GENERAL PARTNERSHIP <input type="checkbox"/> C CORPORATION <input type="checkbox"/> S CORPORATION <input type="checkbox"/> LIMITED LIABILITY CORPORATION				NATURE OF BUSINESS:			
STATE OF CORPORATION:	DATE ESTABLISHED:	YEARS IN BUSINESS:		FLEET SIZE:			
OWNERS, PARTNERS AND GUARANTORS							
1. NAME:		TITLE:		% OF OWNERSHIP:	OWNER SINCE:		
HOME ADDRESS:		CITY, STATE, ZIP CODE:					
SOCIAL SECURITY NUMBER:	HOME TELEPHONE:	DATE OF BIRTH:		E-MAIL ADDRESS:			
2. NAME:		TITLE:		% OF OWNERSHIP:	OWNER SINCE:		
HOME ADDRESS:		CITY, STATE, ZIP CODE:					
SOCIAL SECURITY NUMBER:	HOME TELEPHONE:	DATE OF BIRTH:		E-MAIL ADDRESS:			
3. NAME:		TITLE:		% OF OWNERSHIP:	OWNER SINCE:		
HOME ADDRESS:		CITY, STATE, ZIP CODE:					
SOCIAL SECURITY NUMBER:	HOME TELEPHONE:	DATE OF BIRTH:		E-MAIL ADDRESS:			
BANK / LOAN INFORMATION							
BANK NAME:		ACCOUNT NUMBERS:		CONTACT:		PHONE NUMBER:	
BANK NAME:		ACCOUNT NUMBERS:		CONTACT:		PHONE NUMBER:	
FLEET FINANCE INFORMATION (ADD ADDITIONAL SHEET IF NECESSARY)							
YEAR/MODEL:	FINANCED AT:	ORIGINAL DATE:	TERM:	BALANCE:	MONTHLY PAYMENT:	RESIDUAL BALLOON:	LEASE OR LOAN?:
YEAR/MODEL:	FINANCED AT:	ORIGINAL DATE:	TERM:	BALANCE:	MONTHLY PAYMENT:	RESIDUAL BALLOON:	LEASE OR LOAN?:
YEAR/MODEL:	FINANCED AT:	ORIGINAL DATE:	TERM:	BALANCE:	MONTHLY PAYMENT:	RESIDUAL BALLOON:	LEASE OR LOAN?:
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YEAR/MODEL:	FINANCED AT:	ORIGINAL DATE:	TERM:	BALANCE:	MONTHLY PAYMENT:	RESIDUAL BALLOON:	LEASE OR LOAN?:

The undersigned certifies that the above information given for credit purposes is true and correct and authorizes Prevost Car, Inc., its assigns or designees, and any credit bureau or investigative agency to investigate the references, statements or other data listed or accompanying this application. The undersigned authorizes all parties contacted to release credit and financial information requested, including personal information as a part of said investigation.

SIGNATURE:	TITLE:	DATE:
SIGNATURE:	TITLE:	DATE:
SIGNATURE:	TITLE:	DATE: