

Credit Application

For Questions, Please Contact Us At: (305) 945-1305



PERSONAL INFORMATION

First Name	Last Name	Middle Initial	DOB	Social Security Number
Address		City	State	Zip-Code
Phone		Email		

COMPANY INFORMATION

Name of Company		FEIN	In Business Since	
Address		City	State	ZIP
Legal Form Under Which Business Operates		Corporation ☐	Partnership ☐	Proprietorship ☐
Name of Business Owner #1	Social Security Number	Title		
Address	City	State	ZIP	Phone
Name of Business Owner #2	Social Security Number	Title		
Address	City	State	ZIP	Phone

HAUL REFERENCES

Company Name #1	Phone
Contact Person #1	Time with Company
Company Name #2	Phone
Contact Person #2	Time with Company

FINANCE REFERENCES

Company Name #1	Phone
Contact Person #1	Account Number
Company Name #2	Phone
Contact Person #2	Account Number

FLEET SIZE

Trucks	Trailers	Other
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By submitting this Application, you grant consent to and authorize Star Line Truck & Trailer Sales, Inc., its agents and its successors and assigns to obtain commercial and consumer credit reports and make other credit inquiries that it determines necessary in its sole discretion, and you represent that each individual listed on this Application as a principal, partner, owner, guarantor or obligor likewise has authorized Star Line Truck & Trailer Sales, Inc., its agents and its successors and assigns to obtain commercial and consumer credit reports and make other credit inquiries that it deems necessary in its sole discretion on them. You also warrant the information on or accompanying this Application is true, correct and complete, and you agree to notify Star Line Truck & Trailer Sales, Inc. of any change in such information. You authorize Star Line Truck & Trailer Sales, Inc., and any credit bureau or investigative agency to investigate the references, statements, and other data on or accompanying this Application.

SIGNATURE

DATE