



**Utility Trailer Sales of Oregon, Inc.**

9797 SE Lawnfield Rd.

P.O. Box 1190

Clackamas, OR 97015

**CREDIT APPLICATION**

Fax Completed Application to:

Utility Trailer Sales of Oregon, Inc.

FX(503) 653-4992 PH (503) 653-8686

<b>B U S I N E S S</b>	EXACT LEGAL NAME OF BUSINESS or FULL LEGAL NAME of PURCHASER				TELEPHONE #	
	ADDRESS STREET	CITY	COUNTY	STATE	ZIP CODE	BUS. FAX #
	NATURE OF BUSINESS			AGE OF BUSINESS		STATE OF INCORPORATION
	PHYSICAL LOCATION OF EQUIPMENT (VEHICLES)			DUNS NUMBER		FEDERAL TAX ID#
	CURRENT FLEET SIZE:	# TRACTORS _____	# TRAILERS _____	# TRUCKS _____	OWNER / OPERATOR EXPERIENCE _____ YRS _____ MONTHS	
<b>O W N E R S H I P</b>	PRINCIPAL'S NAME	TITLE	% OWNERSHIP	DATE OF BIRTH		SOCIAL SECURITY #
	HOME ADDRESS (STREET)	CITY	STATE	ZIP	OWN OR RENT	DRIVER'S LICENSE # & STATE
	PRINCIPAL'S NAME	TITLE	% OWNERSHIP	HOME PHONE #	DATE OF BIRTH	SOCIAL SECURITY #
	HOME ADDRESS (STREET)	CITY	STATE	ZIP	OWN OR RENT	DRIVER'S LICENSE # & STATE
<b>B A N K</b>	NAME OF BANK #1	BRANCH	CHECKING ACCT #	BANK CONTACT NAME & PHONE #		
	NAME OF BANK #2	BRANCH	CHECKING ACCT #	BANK CONTACT NAME & PHONE #		
	EQUIP. LOAN/LEASE REFERENCE	LOAN #		LOAN/LEASE CONTACT NAME & PHONE #		
	EQUIP. LOAN/LEASE REFERENCE	LOAN #		LOAN/LEASE CONTACT NAME & PHONE #		
<b>H A U L</b>	HAUL REFERENCE	HOW LONG	MONTHLY INCOME	CONTACT NAME & PHONE #		
	HAUL REFERENCE	HOW LONG	MONTHLY INCOME	CONTACT NAME & PHONE #		
	HAUL REFERENCE	HOW LONG	MONTHLY INCOME	CONTACT NAME & PHONE #		

**PURCHASER'S FINANCIAL AND CURRENT CREDIT STATEMENT**

ASSETS (What is Owned)			VALUE	LIABILITIES (What is Owed)					Amount Owed
Cash On Hand				Accounts Payable (Debt such as Doctor, Fuel Bills, Visa, etc)					
Bank	City, State	Acct No.		Company	City, State	Acct No	Phone No		
		Check							
		Savings							
		Loan							
Accounts Receivable				Total Accounts Payable					\$
Real Estate (Describe)				Financed By:					Balancing
				Name	City, State	Acct No	Contact	Phone No	Payment
									Owing
Trucks Owned (Describe)									
Trailers Owned (Describe)									
Auto and Other Equipment Owned (Describe)									
Other Assets (Describe)									
		Total	\$	Total Liabilities					\$
Assets									
Creditor (Name, City/State, Phone)	Contact	Acct No	Collateral	Date Open	High Bal	Mo Pymnt			
Taken Bankruptcy Within 10 Years				Yes ___ No ___		Yr			
				Any Items Repossessed		Yes ___ No ___			

The information given above is true and complete. Utility Trailer Sales of Oregon may receive from and disclose to other persons, including credit reporting agencies, information about Applicant's accounts and credit experience and Applicant authorizes any person to release to Utility Trailer Sales of Oregon credit experience and account information on Applicant. This shall be a continuing authorization for all present and future disclosures of account information and credit experience on Applicant made by Utility Trailer Sales of Oregon, or any person requested to release such information to Utility Trailer Sales of Oregon.

Name \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_