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Equipment Financing Application

IF INDIVIDUAL APPLICANT SKIP COMPANY INFO. & PROCEED TO APPLICANT INFORMATION

COMPANY INFORMATION					
COMPANY'S EXACT REGISTERED NAME INCLUDING ANY D.B.A:					
Mailing address:					
Date of Incorporation/ Yrs. Under Present Ownership:		Phone #:		Email:	
Federal Tax ID#:		Business Type: () Corp. () Sole Prop. () Partnership () Non-Profit ()		Filed Bankruptcy () Yes () No	
BUSINESS OWNER(S) - PERSONAL INFORMATION - GUARANTOR(S)					
Owner Name:		DOB:	Social Security #:	Title:	% Owned: Homeowner: () Yes () No
Owner Name:		DOB:	Social Security #:	Title:	% Owned: Homeowner: () Yes () No

APPLICANT INFORMATION (IF NOT A CORPORATION/BUSINESS)			
Name:		Date of birth:	SSN:
Email:		Home#	Cell #:
Current address:			
() Own () Rent How Long?		Last known credit score: Date:	Are you a class A driver? () Yes () No
Driving Experience (yrs.)?		Owner Operator? () Yes () No	Owner Op (yrs.)?
CO-APPLICANT INFORMATION, IF FOR A JOINT ACCOUNT			
Name:		Date of birth:	SSN:
Email:		Home#	Cell #:
Current address:			
() Own () Rent How Long?		Last known credit score: Date:	Are you a class A driver? () Yes () No
Driving Experience (yrs.)?		Owner Operator? () Yes () No	Owner Op (yrs.)?

IF NOT AG RELATED SKIP ELIGIBILITY OF APPLICANT & PROCEED TO EQUIPMENT INFORMATION

ELIGIBILITY OF APPLICANT (CHOOSE ONE):		
What is the range of Gross Farm Income? <input type="checkbox"/> \$1-\$10,000 <input type="checkbox"/> \$10,001-\$25,000 <input type="checkbox"/> \$25,001-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$100,001-\$250,000 <input type="checkbox"/> \$250,001-\$500,000 <input type="checkbox"/> \$500,001-\$1,000,000 <input type="checkbox"/> >\$1,000,000	What is the range of Net Non-Farm Income? <input type="checkbox"/> \$1-\$10,000 <input type="checkbox"/> \$10,001-\$25,000 <input type="checkbox"/> \$25,001-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$100,001-\$250,000 <input type="checkbox"/> \$250,001-\$500,000 <input type="checkbox"/> \$500,001-\$1,000,000 <input type="checkbox"/> >\$1,000,000	Does at least 50% of the business income originate from farm service? <input type="checkbox"/> Yes <input type="checkbox"/> No Does asset being financed support the farm service income? <input type="checkbox"/> Yes <input type="checkbox"/> No Is Applicant associated with Ag in some capacity? <input type="checkbox"/> Yes <input type="checkbox"/> No
Preferred Payment Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual		Rate Type: <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
Term: _____ (years)		

EQUIPMENT INFORMATION		
Total price without tax:\$	Requested lease terms (months):	<input type="checkbox"/> NEW <input type="checkbox"/> USED
Description:		MILES:

PAYMENT INFORMATION		
Desired Down Payment: \$	Desired Monthly Payment: \$	What are the highest payments you can afford? \$

By signing below, each undersigned individuals(s), who is either a principle of the credit applicant listed below, or a personal guarantor of its obligations, provides written instructions and authorizes Truck Town and any assignees or potential assignees thereof, or any of its partners authorizing review of his or her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the application of the credit applicant and subsequently for the purposes of update or renewal, or extension of such credit and for reviewing or collecting the resulting account. A photocopy or facsimile copy of this authorization shall be as a valid original. In addition to authorizing review of my/our credit profile from any national credit bureau the undersigned also authorizes my/our financial institutions and creditors to release credit information required by Truck Town or its assignee (and any assignee or potential assignee thereof.)

Signature: _____ Print Name: _____ Title: _____ Date: _____

Co-Signature: _____ Print Name: _____ Title: _____ Date: _____