

GABRIELLI TRUCK SALES, LTD.
CREDIT APPLICATION

QUANTITY _____					
TRUCK	YEAR _____	MAKE _____	MODEL _____	SERIAL # _____	
BODY	YEAR _____	MAKE _____	MODEL _____	SERIAL # _____	
OTHER	YEAR _____	MAKE _____	MODEL _____	SERIAL # _____	

	TRUCK		BODY	
	\$ _____		\$ _____	
FRET	\$ _____		INCLUDED _____	STOCK # _____
SUB	\$ _____			
SALES TAX	\$ _____			
SUBTOTAL	\$ _____			
	\$ _____			
TOTAL	\$ _____			
			TRADE IN	YEAR _____ MAKE _____
TRADE	(\$ _____)			MODEL _____ SERIAL # _____
CASH	(\$ _____)			
FINANCE	\$ _____			YEAR _____ MAKE _____
				MODEL _____ SERIAL # _____
# OF MONTHS	_____			

REGISTRATION NAME _____	FED ID # _____
REGISTRATION ADDRESS _____	FAX # _____
	PHONE # _____
GARAGE ADDRESS _____	CELL # _____
	DOT # _____
NATURE OF BUSINESS _____	# OF TRUCKS _____ YEAR BUSINESS STARTED _____

WORK REFERENCE NAME _____	PHONE # _____
ADDRESS _____	CONTACT _____

WORK REFERENCE NAME _____	PHONE # _____
ADDRESS _____	CONTACT _____

INDIVIDUAL NAME _____	SS# _____	D/O/B _____
SPOUSE'S NAME _____	SS# _____	D/O/B _____
HOME ADDRESS _____	HOW LONG _____	HOME PHONE # _____

PREVIOUS ADDRESS _____	HOW LONG _____
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EMAIL ADDRESS _____

EMAIL ADDRESS _____

CUSTOMER NAME _____

TRADE REF. NAME _____ PHONE # _____
ADDRESS _____ CONTACT _____

TRADE REF. NAME _____ PHONE # _____
ADDRESS _____ CONTACT _____

TRADE REF. NAME _____ PHONE # _____
ADDRESS _____ CONTACT _____

BANK NAME _____ PHONE # _____
ADDRESS _____ CONTACT _____
_____ ACCOUNT # _____

BANK NAME _____ PHONE # _____
ADDRESS _____ CONTACT _____
_____ ACCOUNT # _____

LOAN NAME _____ PHONE # _____ CONTACT _____
ADDRESS _____ ACCT. # _____ AMT. BORROWED _____
_____ COLLATERAL _____ BALANCE _____
_____ MONTHLY PAYMENT _____

LOAN NAME _____ PHONE # _____ CONTACT _____
ADDRESS _____ ACCT. # _____ AMT. BORROWED _____
_____ COLLATERAL _____ BALANCE _____
_____ MONTHLY PAYMENT _____

LOAN NAME _____ PHONE # _____ CONTACT _____
ADDRESS _____ ACCT. # _____ AMT. BORROWED _____
_____ COLLATERAL _____ BALANCE _____
_____ MONTHLY PAYMENT _____

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ADDRESS _____ ACCT. # _____ AMT. BORROWED _____
_____ COLLATERAL _____ BALANCE _____
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LOAN NAME _____ PHONE # _____ CONTACT _____
ADDRESS _____ ACCT. # _____ AMT. BORROWED _____
_____ COLLATERAL _____ BALANCE _____
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LOAN NAME _____ PHONE # _____ CONTACT _____
ADDRESS _____ ACCT. # _____ AMT. BORROWED _____
_____ COLLATERAL _____ BALANCE _____
_____ MONTHLY PAYMENT _____

I hereby acknowledge that all information set forth in this credit application is true and correct, to the best of my knowledge, and has been submitted for the purpose of inducing Gabrielli Truck Sales Ltd. to submit to finance companies to extend credit to me. Further, I authorize the finance companies to fully investigate my credit background, including communication with any or all credit references listed in this application to verify the accuracy of any statement contained herein, or to ascertain further information concerning my creditworthiness.

X _____ Date _____

X _____ Date _____