

GABRIELLI TRUCK LEASING, LLC  
CREDIT APPLICATION

Quantity \_\_\_\_\_  
 TRUCK YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_  
 TRACTOR YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_

	Truck	Body
	\$ _____	_____
FRET	\$ _____	_____
SUB	\$ _____	_____
SALES TAX	\$ _____	_____
COMBINED	_____	_____
TOTAL	\$ _____	_____
CASH	\$ _____	_____
FINANCE	\$ _____ -	_____ -
# OF MONTHS	_____	_____

\*This section will be completed by Gabrielli Sales Representative

Customer Name: \_\_\_\_\_ FED ID#: \_\_\_\_\_  
 Customer Address: \_\_\_\_\_ USDOT #: \_\_\_\_\_  
 \_\_\_\_\_  
 Garage Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Nature of Business \_\_\_\_\_ Year Business Started: \_\_\_\_\_

Work Reference Name 1: \_\_\_\_\_ Phone#: \_\_\_\_\_  
 Address \_\_\_\_\_ Contact: \_\_\_\_\_  
 \_\_\_\_\_

Work Reference Name 2: \_\_\_\_\_ Phone#: \_\_\_\_\_  
 Address \_\_\_\_\_ Contact: \_\_\_\_\_  
 \_\_\_\_\_

Owner 1 Name \_\_\_\_\_ SSN: \_\_\_\_\_  
 Home Address \_\_\_\_\_ DOB: \_\_\_\_\_  
 \_\_\_\_\_ How Long: \_\_\_\_\_

Previous Address \_\_\_\_\_  
 \_\_\_\_\_ How Long: \_\_\_\_\_

Owner 2 Name \_\_\_\_\_ SSN: \_\_\_\_\_  
 Home Address \_\_\_\_\_ DOB: \_\_\_\_\_  
 \_\_\_\_\_ How Long: \_\_\_\_\_

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TRADE REF. NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_

TRADE REF. NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_

TRADE REF. NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_

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BANK NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_ Account # \_\_\_\_\_

BANK NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_ Account # \_\_\_\_\_

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LOAN NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_ Account # \_\_\_\_\_

COLLATERAL: \_\_\_\_\_  
MONTHLY PAYMENT \_\_\_\_\_ BALANCE: \_\_\_\_\_

LOAN NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_ Account # \_\_\_\_\_

COLLATERAL: \_\_\_\_\_  
MONTHLY PAYMENT \_\_\_\_\_ BALANCE: \_\_\_\_\_

LOAN NAME: \_\_\_\_\_ Phone: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ Contact: \_\_\_\_\_  
\_\_\_\_\_ Account # \_\_\_\_\_

COLLATERAL: \_\_\_\_\_  
MONTHLY PAYMENT \_\_\_\_\_ BALANCE: \_\_\_\_\_

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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 Leasing, LLC 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, or to ascertain further information concerning my creditworthiness.

\_\_\_\_\_ Date: \_\_\_\_\_ Print Name: \_\_\_\_\_