



TEXAS TRUCK SALES

3700 N McCarty St
HOUSTON, TEXAS 77029

PH: 713-675-8585 FAX: 713-675-3600

APPLICANT INFORMATION DATE:

First Name		Last		Current Steet Address		City	State	Zip
Drivers License # - State		Own	PARENTS	Social Security #	Date of Birth	Time @ current home		
		Rent	OTHER			Time @ previous home		
Marital Status		Home Phone #		Cell Phone#	# of Dependand	Gross Monthly Income		
Previous Address (if less than 5 years)		Street		City	State	Zip		

BUSINESS INFORMATION

Company Name		Total CDL Experience		Tax ID #	Number OF Trucks/Trailers Owned			
Previous Truck Finance With:		Account#		Phone#	Contact			

EMPLOYER INFORMATION

Applicant Current Employer		Business Address		City	State	Zip	
Work Phone #		Contact:		Time w Present Employer:			

PREVIOUS DRIVING EXPERIENCE OR HAUL SOURCES

COMPANY NAME	COMPLETE ADDRESS	CONTACT	LENGTH	PHONE#

TRUCK LEASE TO (INFO)

COMPANY NAME	ADDRESS	CONTACT	PHONE#

CREDIT REFERENCES

1) COMMERCIAL:	Monthly Payment	Balance
2) AUTO:	Monthly Payment	Balance
3) AUTO:	Monthly Payment	Balance
4) MORTGAGE:	Monthly Payment	Balance
5) LANDLORD:	Monthly Payment	

BANK INFORMATION

Bank Name:	Checking Account#	Balance
Bank Name:	Savings Account#	Balance
Are you obliged to make alimony, child support or other support or maintenance payments?		yes no
If "yes" to whom:		Monthly Amount:
Have you declared bankruptcy in the last seven (7) years?		yes no

Signatures: I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below, I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature	Date
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JOINT APPLICATION

First Name		Last		Current Steet Address		City	State	Zip
Drivers License # - State		Own	PARENTS	Social Security #	Date of Birth	Time @ current home		
		Rent	OTHER			Time @ previous home		
Marital Status		Home Phone #		Cell Phone#	# of Dependand	Gross Monthly Income		
Applicant Current Employer		Current Steet Address		City	State	Zip		
Work Phone	713-675-8585	Title		Time With Employer				

Signatures: I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below, I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Co Buyer Signature	Date
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