

Phone #: (336) 996-6060  
 Email:  
 accountsreceivable@tsource.com



P.O. Box 446,  
 Kernersville, NC 27285

**Truck & Trailer Centers**

**Credit Application**

Please check the type(s) of financing for which you are applying:      Truck Financing      TranSource Credit Account      Leasing

TranSource Salesperson:		TranSource Location:		Date (mm/dd/yy):	
Borrower Name (Company or Individual):				Primary Contact for Borrower (If Company):	
Borrower Address:				Federal Tax ID or SS#	Phone #:
City:		State:	Zip:	County:	Date of Birth (if individual):
					Mobile #:
					Fax #:
Name of Parent Company (if Subsidiary):				E-mail Address :	
Business Annual Revenue		<\$1 Million	\$1 Million - \$3 Million	Legal Entity Type:	
\$3 Million - \$10 Million		\$10 Million - \$50 Million	>\$50 Million	Corporation	Sole Proprietorship
				Partnership	LLC
				LLP	S-Corp
				Non-profit	Govt.
# Heavy Duty Trucks: (In current fleet)	# Medium Duty Trucks: (In current fleet)	# Trailers (In current fleet)	Date of Incorporation:		State of Incorporation:

Owner / Guarantor Name (if different):			SS# or Fed Tax ID:		Date of Birth:
Address:			Percent Ownership:		Home Phone #:
City:	ST:	Zip:			
2nd Guarantor Name (if applicable):			SS# or Fed Tax ID:		Date of Birth:
Address:			Percent Ownership:		Home Phone #:
City:	ST:	Zip:			

Lessor/Creditor Name	Phone #	Yr. Acct Opened	Original Bal.	Current Bal.	Monthly Pymt.	Collateral Financed (Make/Model)
			\$	\$	\$	
			\$	\$	\$	

Description of Business:		Years as Owner/Operator:	
Years of Experience:		Number of Employees:	

Materials Hauled:				
Current Hauling References/Company Name:		Years Worked:	Contact:	Phone#:
Current Hauling References/Company Name:		Years Worked:	Contact:	Phone#:

**For a TranSource Parts & Service or Leasing Account, please provide the following (in addition to information on page 1):**

Trade Reference	Contact:	Credit Limit:	Phone #:	Fax #:	E-mail Address:
Trade Reference	Contact:	Credit Limit:	Phone #:	Fax #:	E-mail Address:
Trade Reference	Contact:	Credit Limit:	Phone #:	Fax #:	E-mail Address:
Trade Reference	Contact:	Credit Limit:	Phone #:	Fax #:	E-mail Address:
Trade Reference	Contact:	Credit Limit:	Phone #:	Fax #:	E-mail Address:

- **Minimum of 5 Trade References Required for TranSource Credit Account**
- Please include trade references that are in a related/similar field as TranSource (Ex. Truck parts/service vendor, tire vendor, etc.)
- Please include e-mails and/or fax numbers for quicker processing

Bank Name:	Phone#:	Bank Contact:
Checking Account #:	Checking Balance: \$	
Line of Credit Limit: \$	Line of Credit Available: \$	

Ever Filed Bankruptcy?:	Yes	No	Had a Repossession?:	Yes	No
Are there any law suits pending?:	Yes	No	If Yes, explain:		
Are any Taxes Currently Past Due?:	Yes	No	If Yes, explain:		

Insurance Carrier:	Contact:	Phone#:
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The undersigned certifies that the information contained in this credit application is true and complete, and authorizes TranSource, Inc. to submit this application for consideration of the purchase of a vehicle or for an open account. TranSource, Inc. and/or its assigns 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 credit experience and account information on the Applicant. This shall be continuing authorization for all present or future inquiries and disclosures of account information and credit experience on the Applicant made by TranSource, Inc. or any person requested to release such information to TranSource, Inc. A photocopy or facsimile of this Agreement will be legally admissible under the "best evidence rule." A signed copy of this credit application and/or any related document sent by facsimile shall be treated as an original document and shall be admissible as evidence thereof, and all signatures thereon shall be binding as if manual signatures were personally delivered.

By:	By:	Date: <small>(mm//dd//yy)</small>
<b>(Signature)</b>	<b>(Please Print Name)</b>	

By:	By:	Date: <small>(mm//dd//yy)</small>
<b>(Signature)</b>	<b>(Please Print Name)</b>	



Truck & Trailer Centers

**TranSource Credit Account**

For TranSource to process and approve an open account for your parts, service, rental & leasing purchases, we must have the following information and signature agreeing to our credit terms.

Do you require Purchase orders?    Yes    No

Requested Credit Line \$ \_\_\_\_\_

Are you Sales Tax Exempt?    Yes    No    (If Yes, please attach valid exemption form.)

Accounts Payable Contact: \_\_\_\_\_

A/P Phone: \_\_\_\_\_ A/P Fax: \_\_\_\_\_

A/P E-mail: \_\_\_\_\_

**Terms of Sale**

1. Statements reflect activity through the last day of the month and will be mailed to you no later than the 3<sup>rd</sup> of each month. Parts and Service invoices are given at the time of purchase and are NOT mailed. It is the customer's responsibility to check the monthly statements for missing invoices and contact the parts/service department or accounting department for copies of missing invoices.
2. **Terms are NET 30 days from date of invoice.**
3. Any invoice not paid within terms is subject to late charges. The buyer agrees to pay late charges of 1.5% per month (18% annually). Delinquent accounts are subject to C.O.D status until account is brought current.
4. If it becomes necessary for collection, I/We agree to pay all cost of collection including reasonable court costs and attorney fees.
5. Merchandise returned for credit for reasons other than material defects will be subject to a 10% handling charge. Prior written approval is required. The original invoice must accompany the part(s) being returned.
6. **DISCLAIMER OF WARRANTIES:** Any warranties on the products sold hereby are those made by the manufacturer. The seller, TranSource, Inc., hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty of merchantability or fitness for a particular purpose, and TranSource, Inc. neither assumes nor authorizes any other person to assume liability in connection with the sale of said products.

Full Name of Firm: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Officer or Owner: \_\_\_\_\_

Title: \_\_\_\_\_