

# PERFORMANCE FINANCIAL SERVICES, L.P.

A Division of Cleveland Mack Sales, Inc. / Performance Kenworth

FOR OF FICE USE ONLY	DEALER
	SALESMAN
	DATE

**PLEASE TYPE OR PRINT**

## PERSONAL INFORMATION

NAME	FIRST	MIDDLE INITIAL	LAST	DATE OF APPLICATION
SOCIAL SECURITY NUMBER	DATE OF BIRTH	MARITAL STATUS		NO. OF DEPENDENTS
		<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <small>(SINGLE, F., WIDOWED, DIVORCED)</small>		<input type="checkbox"/> SEPARATED
STREET ADDRESS				PHONE NO.
CITY	STATE	ZIP CODE	HOW LONG AT THIS ADDRESS?	HOW LONG IN AREA?
			YRS	Y
FORMER ADDRESS (FOR PAST FIVE YEARS)			CITY, STATE, ZIP CODE	HOW LONG

BUSINESS NAME	BUSINESS TAX I.D. NO.	
BUSINESS ADDRESS (IF DIFFERENT FROM ABOVE)	BUSINESS PHONE NO.	
SPOUSE'S NAME (FIRST, M.I., LAST)	DATE OF BIRTH	SOCIAL SECURITY NO.
SPOUSE'S EMPLOYER	POSITION(S) HELD	HOW LONG?

### EMPLOYMENT HISTORY FOR PAST FIVE YEARS (PRESENT OR LAST EMPLOYER FIRST)

#	NAME AND ADDRESS OF COMPANY	PHONE NO.	POSITION(S) HELD	HOW LONG?
1				
2				
3				

NEAREST RELATIVE OF YOURS NOT LIVING WITH YOU	NAME	ADDRESS
NEAREST RELATIVE OF YOURS NOT LIVING WITH YOU	NAME	ADDRESS

HAVE YOU EVER TAKEN BANKRUPTCY?	ARE YOU DEFENDENT IN ANY LEGAL ACTION?	HAVE YOU EVER HAD ANY ITEM REPOSSESSED?
<input type="checkbox"/> NO <input type="checkbox"/> YES - EXPLAIN BELOW	<input type="checkbox"/> NO <input type="checkbox"/> YES - EXPLAIN BELOW	<input type="checkbox"/> NO <input type="checkbox"/> YES - EXPLAIN BELOW
EXPLANATION		

### PREVIOUS TRUCK PURCHASES

YEAR, MAKE	PURCHASED FROM	DATE PURCHASED	DATE PAID OFF	FINANCED WITH (NAME, LOCATION, ACCOUNT NO.)

### TRUCK USAGE

TRUCK TO BE LEASED TO	ADDRESS, CITY, STATE, ZIP CODE	
PURCHASER TO DRIVE?	IF NO, NAME AND ADDRESS OF DRIVER AGE SALARY	DRIVER'S SOCIAL SECURITY NO.
<input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMODITY HAULED	AREA HAULED	

### FIRE, THEFT, CAC AND COLLISION INSURANCE IS REQUIRED

NAME OF AGENT	ADDRESS	PHONE NO.
NAME OF COMPANY	ADDRESS	COVERAGE TO BE SUBJECT TO MILEAGE RESTRICTION?
		<input type="checkbox"/> NO <input type="checkbox"/> YES (SPECIFY RADIUS _____)

**BALANCE SHEET (ATTACH ADDITIONAL SHEETS IF NECESSARY)**

ASSETS (WHAT YOU OWN)	VALUE	LIABILITIES (WHAT YOU OWE)	
CASH IN BANK (NAME, CITY, STATE)		ACCOUNTS PAYABLE (FUEL BILLS, REPAIRS, ETC.)	
ACCOUNTS RECEIVABLE			
VEHICLES (AUTOS, TRUCKS, TRAILERS)		FINANCED BY (NAME, CITY, STATE, ACCOUNT NO.)	
REAL ESTATE		FINANCED BY (NAME, CITY, STATE, ACCOUNT NO.)	
MACHINERY, TOOLS			
FURNITURE & FIXTURES			
OTHER ASSETS		OTHER DEBTS (ITEMIZE)	
<b>TOTAL ASSETS</b>		<b>- TOTAL LIABILITIES</b>	
		<b>= NET WORTH</b>	

**CREDIT REFERENCES (LIST CREDIT REFERENCES ON PAID ACCOUNTS)**

1	NAME	CITY	STATE	PHONE NO.	CONTACT PERSON	ACCOUNT NO.	HIGHEST OWING
2	NAME	CITY	STATE	PHONE NO.	CONTACT PERSON	ACCOUNT NO.	HIGHEST OWING
3	NAME	CITY	STATE	PHONE NO.	CONTACT PERSON	ACCOUNT NO.	HIGHEST OWING
BANK REFERENCE		CITY	STATE	ACCOUNT NO.			

**INCOME STATEMENT**

TIME PERIOD	GROSS TRUCKING INCOME	OTHER INCOME	DEDUCTIONS & EXPENSES	OPERATING PROFIT
FROM				
TO				
	+		-	=

**CERTIFICATION AND AUTHORIZATION**

For the purpose of establishing and maintaining credit, the undersigned submits the foregoing statement and information contained on this sheet, both written and printed, and including supplements sheets, if any, as being a full, true, and correct statement of my financial condition and all above matters, on the date stated. The undersigned agrees to notify you immediately in writing of any materially unfavorable change in my financial condition or the above matters, and in the absence of such notice or of a new and full written statement, all matters herein may be considered as a continuing statement and substantially correct. The undersigned hereby authorizes GCKW/CMSI to make inquiry into, to request, and to receive any information concerning my character, general reputation, personal characteristics, mode of living, and all information from creditors which GCKW/CMSI deems relevant for the granting and collection of the proposed borrowing. This authorization shall be effective from the date upon which this application is signed and is extinguished automatically upon full payment of the present borrowing, if any is granted. Upon my written request, additional information as to the scope of this inquiry, if one is made, will be provided.

I further represent that neither the undersigned, any principal officer of undersigned, nor any contemplated operator of any equipment proposed to be purchased has any record or reputation of having violated any federal or state laws relating to liquor, narcotics or contraband; and no such person has been convicted of any felony.

I understand that GCKW/CMSI and/or any finance source for motor vehicles, trailers, parts or services to whom this application is presented, will be relying on the accuracy of the matters set forth herein as a basis for extending any credit which I may receive.

**X** \_\_\_\_\_  
SIGNATURE OF APPLICANT

DATE

**X** \_\_\_\_\_  
SIGNATURE OF SPOUSE

DATE