

Florida Shores Truck Center Credit Application

PO 880 Edgewater, Fl 32132

Please Complete and return to: _____ →

Jason Aldridge
fstc1@hotmail.com
 Cell (386)-689-5856
 Toll Free (888) 500-5635
 Fax: (386)-428-0338

Company Information

Business Name:				Phone #:		
Address:		City	State	Zip	County	Fax #:
Email Address:		Years in Business:	Marital Status:		Cellular #:	
Have you ever filed bankruptcy or had a repossession?		State of Incorporation:			Federal Tax ID #:	
Principal's Name:			Title:	% Own	Social Security #	
Home Address		City	State	Zip	Home Phone # ()	
2 nd Principal's Name (Spouse or Co-Signer):			Title:	% Own	Social Security #	
Home Address		City	State	Zip	Home Phone # ()	

Bank References

Bank Reference (business checking):	Account #:	Date Opened	Phone #:	Contact Name:
Loan/ Lease Reference:	Account #:	Date Opened	Phone #:	Contact Name:

References

Hauling Reference:	Address:	Contact Name:	Phone #:	Weekly Income:
Nearest relative not living with you:	Address:	Relationship:	Phone #:	County:

Equipment Information

Dealer Name:		Phone #:	Fax #:	
Address:		City	State Zip	Contact
Description of Equipment to be financed:			Dollar Amount	Term

By signing below, the undersigned individual, who is either a principal of the credit applicant or a personal guarantor of its obligations, provides written instruction to NCC or its designee (and any assignee or potential assignee thereof) authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or extension of such credit or additional credit and for reviewing or collecting the resulting account. A Photostat or facsimile copy of this authorization shall be considered as the original. By signature below, I/we affirm my/our identity as the respective individual/s identified in the above application.
 Release: I hereby release the above banks and references to release credit information to any inquiring funding source.

Signature: _____

NAME: _____

ADDRESS: _____ SOCIAL SECURITY # _____

The undersigned for the purpose of inducing Northland Credit Corporation (herein called the bank) from time to time in reliance hereon, to make loans, renewals or extensions to the undersigned, or to have the undersigned become obligated to the Bank in a manner directly or contingently, alone or jointly with others, furnishes the Bank with the following financial statement of the below date and until the undersigned gives to the Bank a new statement or a notice in writing to the contrary, represents and warrants to the Bank that the following statements true and specifically made for the above stated purpose, and further agrees that this statement shall be regarded as continuing representation and warranty on each occasion that the undersigned shall become obligated to the Bank in any manner, and that the statement is on each such occasion, true and specifically made and repeated for the above state purpose.

ASSETS**LIABILITIES**

Cash in Bank		Notes Payable	
Cash in IRA's and 401K's		Notes Payable other	
Stock and Bonds		Installment Accounts Payable	
Cash Surrender Value of Life Insurance Policy		Other Accounts Payable	
Vehicles (see below)		Mortgage on Real Estate	
Real Estate (see below)		Other Liabilities (describe)	
(A) TOTAL ASSETS		(B) TOTAL LIABILITIES	
		(A) - (B) = NET WORTH	

VEHICLES OWNED

Vehicle Description	Current Value	Original Cost	Balance	Originating Bank

REAL ESTATE

Location of Real Estate Owned	Current Value	Original Cost	Date of Purchase	Mortgage Balance

INCOME

Year to date	Gross Business Income + Other Income	- Deductions & Expenses (Fuel, Insurance...)	= Operating Profit

INSURANCE INFORMATION

Name of Company	Name of Agent	Address	Phone Number	Fax Number

Are you a co-signer, endorser, or guarantor for any other obligations not listed above? If so please list below:

Company or Individual	Address	Acct. Number	Original Amt.	Unpaid Balance	Monthly Payment

Please list any particulars separately for each type of stock, bond or other asset owned:

No. of Items	Description	Cost	Market Value

Have you any judgments, garnishments, or legal processing against you? _____ If so please explain by letter.
The undersigned certifies that the above information is true and correctly sets forth the financial condition of the applicant.

Signature _____ Date _____