



NACARATO VOLVO FINANCE APPLICATION

BUSINESS INFORMATION:

DATE: _____

BUSINESS NAME: _____ PHONE: _____
SSN/FED ID: _____ FAX : _____
ADDRESS: _____ Date Inc. _____ State Inc. _____
CITY: _____ STATE: _____ ZIP: _____ COUNTY _____

MAILING ADDRESS:

PERSONAL INFORMATION:

NAME: _____ DBA: _____
HOME ADDRESS: _____ D.O.B _____ SSN: _____
CITY: _____ STATE: _____ ZIP: _____ COUNTY _____
PHONE: _____ CELL PHONE: _____ RENT/OWN _____
PREV. ADDRESS: _____ YEARS AT CURRENT ADDRESS _____

CURRENT INFORMATION :

COMPANY: _____ PHONE: _____
CONTACT: _____ EMPLOYED SINCE: _____ TIME ON JOB _____
TRUCKS OWNED/LEASED: _____ TRAILERS _____ ANNUAL INCOME \$ _____
TRUCKS UNDER CONTRACT? YES _____ NO _____ IF YES, COMPANY NAME: _____
TYPE OF USE: _____
COMMERCIAL DRIVER'S LICENSE # _____ STATE _____ EXPIRES _____
HOW LONG AS OWNER/OPERATOR _____ TOTAL YRS IN TRUCKING _____

WORK HISTORY / HAUL REFERANCES

FIVE YEARS OR MORE EMPLOYMENT

COMPANY _____	POSITION _____	CONTACT _____
DATES EMPLOYED: _____		PHONE _____
COMPANY _____	POSITION _____	CONTACT _____
DATES EMPLOYED: _____		PHONE _____
COMPANY _____	POSITION _____	CONTACT _____
DATES EMPLOYED: _____		PHONE _____

FINANCIAL INFORMATION:

Bank-Checking & Savings References Only

Bank Name	Contact	Phone	City/State	Complete Acct #
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____

Bank Credit/Finance Co. References	Contact	Phone	City/State	Complete Acct. #
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Home: _____
Truck: _____
Other: _____
Other: _____

Prior Bankruptcy: Yes _____ No _____ If Yes, When? _____
Prior Repo: Yes _____ No _____ If Yes, When? _____

This information is for the purpose of securing credit I/We certify that the above information is true and complete to the best of my/our knowledge.

I/We authorize my/our creditors, employers, and assigns to provide employment and/or obtain information about me/us to secure said credit.

BUYER _____ CO-BUYER _____
Signature _____ Signature _____
Title (if applicable) _____ Title (if applicable) _____

RETURN TO:

615-793-7497

REVISED 01/16/2013