

CREDIT APPLICATION

Utility Trailer Sales of Virginia

a Division of C.R.T.S., Inc.

711 N Washington Hwy, Ashland, VA 23005 800-443-5254
 146 Simmons Drive, Cloverdale, VA 24077 877-992-9850

C.R.T.S., Inc.

3301 Integrity Drive, Garner, NC 27529 800-662-7026
 2956 Amity Hill Road, Statesville, NC 28677 877-754-4329
 231 Starfile Road, Mt Airy, NC 27030 888-782-7456
 1788 Two Notch Road, Lexington, SC 29073 877-818-2787

PERSONAL INFORMATION

NAME: FIRST			MIDDLE INITIAL		LAST		DATE OF APPLICATION			
SOCIAL SECURITY NUMBER			DATE OF BIRTH			MARTIAL STATUS		NO. OF DEPENDENTS		
ADDRESS							PHONE NUMBER			
CITY, STATE, ZIP					HOW LONG AT THIS ADDRESS?		HOW LONG IN AREA?			
FORMER ADDRESS (FIVE YEAR MINIMUM)					CITY, STATE, ZIP		HOW LONG?			
LEGAL COMPANY NAME					I.C.C. NUMBER		BUSINESS TAX I.D. NUMBER			
BUSINESS ADDRESS (IF DIFFERENT FROM ABOVE)							BUSINESS PHONE NUMBER			

HAULING REFERENCES/EMPLOYMENT HISTORY FOR PAST FIVE YEARS

COMPANY NAME AND ADDRESS	CONTACT Y / N	CURRENT HOW LONG?	PHONE NUMBER

INSURANCE INFORMATION

INSURANCE COMPANY - LIABILITY	AGENT	PHONE NUMBER
INSURANCE COMPANY - PHYSICAL DAMAGE	AGENT	PHONE NUMBER

COMPLETE THIS SECTION ONLY IF THIS IS A JOINT APPLICATION WITH YOUR SPOUSE OR IF YOU ARE RELYING ON SPOUSE'S INCOME OR ASSETS AS A BASIS FOR REPAYMENT OF THE CREDIT REQUESTED, OR IF YOU RESIDE IN A COMMUNITY PROPERTY STATE.

SPOUSE'S NAME (FIRST, M.I., LAST)		DATE OF BIRTH	SOCIAL SECURITY NUMBER
SPOUSE'S EMPLOYER		POSITION HELD	HOW LONG?
NEAREST RELATIVE NOT LIVING WITH YOU	ADDRESS		RELATIONSHIP
HAVE YOU EVER TAKEN BANKRUPTCY? N / Y IF YES - EXPLAIN BELOW	ARE YOU A DEFENDANT IN ANY LEGAL ACTION? N / Y IF YES - EXPLAIN BELOW	HAVE YOU EVER HAD ANY ITEM REPOSSESSED? N / Y IF YES - EXPLAIN BELOW	
EXPLANATION			

TRUCK USAGE

HOW LONG OWNER/OPERATOR?	OPERATOR'S LICENSE NUMBER	STATE	DATE	PURCHASER TO DRIVE? YES / NO IF NO, PROVIDE INFORMATION BELOW ON DRIVER
DRIVER'S NAME (FIRST, M.I., LAST)			ADDRESS	
YEARS OF EXPERIENCE	OPERATOR'S LICENSE NUMBER	STATE	DATE	SOCIAL SECURITY NUMBER
TRUCK TO WORK FOR - COMPANY NAME			ADDRESS	
IF TRUCKING - BETWEEN WHAT POINTS			OFF HIGHWAY USE N / Y	AVERAGE MILEAGE PER MONTH

FOR PROMPT INVESTIGATION: LIST NAME OF BANKS, CREDITORS, PHONE #, CITY, STATE, ACCT #, CONTACT PERSON, \$ AMOUNT

ASSETS		AMOUNT	LIABILITIES		AMOUNT
BUSINESS CHECKING:		\$	TOTAL OF CREDIT CARD DEBTS		
			OUTSTANDING		\$
			(DO NOT ITEMIZE CREDIT CARDS)		
PERSONAL CHECKING:		\$	TOTAL OF OTHER SMALL DEBTS OWED:		\$
		\$			
SAVINGS:					
RESIDENCE:		\$	MORTGAGE:		\$
OTHER REAL ESTATE:		\$	MORTGAGE:		\$
TRUCKS OWNED:		\$	FINANCED BY:		\$
TRAILERS OWNED:		\$	FINANCED BY:		\$
CARS & OTHER EQUIPMENT OWNED:		\$	FINANCED BY:		\$
VALUE OF FURNITURE/HOUSEHOLD GOODS:		\$	OTHER LOANS:		\$
VALUE OF TOOLS AND BUSINESS ASSETS:		\$			
TOTAL ASSET VALUES		\$	LESS TOTAL LIABILITIES		\$
			EQUALS NET WORTH		\$

CREDIT REFERENCES (LIST CREDIT REFERENCES ON PAID ACCOUNTS)

NAME	CITY	STATE	PHONE NO.	CONTACT/PERSON	ACCOUNT NO.	HIGHEST OWING
1)						
2)						
3)						

BANK REFERENCE:	NAME	CITY/STATE	ACCOUNT NO.
	PHONE NO.	CONTACT	

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 both written and printed, and including supplemental sheets, if any, as being a full, true and correct statement of my financial condition and all above matters, on the 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 you 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 you deem relevant for the granting and a 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 request, additional information as to 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 all lenders, C.R.T.S., Inc., and/or any seller or motor vehicles, 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 DATE

X _____
SIGNATURE DATE