



FORD CREDIT

**BUSINESS
CREDIT
APPLICATION**

DEALER		LOCATION	
CONTACT	PHONE	FAX	

FC-7144 (REV. June 12) Previous editions may not be used.

Legal Name:		Date of Birth (for Individuals):		DBA:		
☐ Proprietorship ☐ Corp. ☐ Sub S ☐ LLC. ☐ Partnership ☐ Other: _____ Tax Exempt Number: _____						
State-issued Organization # (not tax id #):			State of Organization or state of legal residence for individuals:			
SOC SEC # / TAX ID #		Gross Profit (Monthly Income)		Type of Business		
Yrs in Business		E-Mail and Website Address				
Primary Legal/CEO Address: Street		City		County	State Zip	
Billing Address: Street (if different from above)		City		County	State Zip	
Fleet Manager Name:		Phone #		E-mail Address		
Garage Address: Street		City		County	State Zip	
Phone #		Fax #	Mobile Phone #		Contact Name	
Owner/Guarantor: Name		Title	Address		PH# Social Security / TN # Date of Birth Ownership %	
Owner/Guarantor: Name		Title	Address		PH# Social Security / TN # Date of Birth Ownership %	
Note: Sole Proprietor, Individual Co-Applicant(s) or Individual Guarantor(s) must complete this section						
Complete for Individuals only	Individual (First Name, Middle Name, Last Name, Suffix):			Social Security Number		Date of Birth
	Home Phone ()		☐ Own Home Outright ☐ Buying Home	☐ Living with Relatives ☐ Leasing/Renting		Driver's License No. & State
	Previous Employer / Business (if less than 2 years)			Address		Phone Number ()
	Monthly Income	Secondary Income *	Source	*Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.		
	Mortgage Holder / Landlord (Name & Address)			Mortgage Holder / Landlord Phone ()		Mortgage Payt / Monthly Rent
	Name & Address of applicant's nearest relative not in household			Relationship		Home Phone ()
	Name & Address of applicant's non-related personal reference known over one year			Relationship		Home Phone ()
	Please use additional applications if more space is needed for multiple owner, quarantor or applicant information.					
Have you previously done business with Ford Motor Credit Company (check one ☐ Yes ☐ No) If yes, Acct #: _____						
List other creditors you do business with:						
Bank	City & State	Telephone #	Contact	Account #		
Trade	City & State	Telephone #	Contact	Account #		
IMPORTANT INFORMATION ABOUT ESTABLISHING A RELATIONSHIP WITH FORD CREDIT						
For the purpose of securing credit from Ford Motor Credit Company ("Ford Credit"), each of the parties signing below (the "Undersigned") certifies that the above information is true and complete. The Undersigned authorize Ford Credit to: (i) check their respective credit and employment histories and to provide and/or obtain information about their credit experience with Ford Credit, and (ii) at any time, sell, transfer, or assign any credit secured from Ford Credit and any or all servicing rights with respect thereto, or grant participations therein or issue securities with respect thereto.						
The Undersigned each consent and specifically authorize Ford Credit, as it may deem necessary or desirable, to forward any documentation and information which Ford Credit now has or may hereafter acquire in connection with any transaction between any of the Undersigned and Ford Credit to any potential investor, rating agency, and any other party involved in the sale, transfer, assignment, securitization, or participation transaction involving any credit granted to the Undersigned.						
Ford Credit may receive from and disclose to other persons, including credit reporting agencies, financial information about the Undersigned and information about each Undersigned's account and credit experience and each of the Undersigned authorizes any person to release to Ford Credit financial information about the Undersigned and credit experience and account information on the Undersigned. In addition, each of the Undersigned agrees that Ford Credit may receive from and disclose to any of its affiliates, any and all such information now or hereafter provided by the Undersigned to any of the foregoing entities, including without limitation present and future credit applications, financial statements and organizational documents. This is a continuing authorization for all present and future disclosures of financial information, account information and credit experience on the Undersigned made by Ford Credit, or any person requested to release such information to Ford Credit. The Undersigned each agree that a credit report bearing on such Undersigned's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or way of living may be requested in connection with this application and future requests for credit. Upon request from any of the Undersigned, Ford Credit will advise such Undersigned, as applicable, whether a credit report was requested and if such a report was requested, Ford Credit, will inform such Undersigned, as applicable, of the name and address of the credit reporting agency that furnished the report.						
The Undersigned each agree that Ford Credit, its affiliates, agents and service providers may monitor and record telephone calls regarding my account to assure the quality of service or for other reasons. Each of the Undersigned also expressly consent and agree to Ford Credit, its affiliates, agents and service providers using written, electronic or verbal means to contact the Undersigned. This consent includes, but is not limited to, contact by manual calling methods, prerecorded or artificial voice messages, text messages, emails and/or automatic telephone dialing systems. The Undersigned each agree that Ford Credit, its affiliates, agents and service providers may do so using any e-mail address or any telephone numbers the Undersigned provide, now or in the future, including a number for a cellular phone or other wireless device, regardless of whether the Undersigned incur charges as a result.						
SEE NEXT PAGE OF THIS FORM FOR IMPORTANT INFORMATION FOR CALIFORNIA, MAINE, OHIO, RHODE ISLAND, TENNESSEE, AND VERMONT.						
Applicant Signature _____		Title _____		Date _____		
I intend to apply for joint credit		Applicant Initial Here _____				
Co-Applicant Signature _____		Title _____		Date _____		
I intend to apply for joint credit		Co-Applicant Initial Here _____				
Guarantor Signature _____		Title _____		Date _____		
**If corporate guarantor, authorized officer must sign and show corporate title. If partnership guarantor, a general partner must sign and show "Partner" as Title. If individual guarantor, show "Individual" as Title.						