



BUSINESS CREDIT APPLICATION



NAME _____ TELEPHONE # _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

NUMBER OF YEARS IN BUSINESS _____

FAX _____ EMAIL _____

PRINCIPAL OWNERS _____ SS # _____

IF BUSINESS IS NOT INCORPORATED PLEASE DISCLOSE BIRTH DATE ____/____/____

TAX EXEMPT? YES _____ NO _____ IF YES, PLEASE INCLUDE A COPY OF CERTIFICATE

DOES YOUR COMPANY REQUIRE PURCHASE ORDER NUMBERS? YES _____ NO _____

BANK REFERENCE

NAME _____ TELEPHONE # _____

ADDRESS _____

BUSINESS REFERENCES

BUSINESS NAME _____ TELEPHONE # _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

BUSINESS NAME _____ TELEPHONE # _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

BUSINESS NAME _____ TELEPHONE # _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

IT IS UNDERSTOOD THAT THIS INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE AND USED ONLY FOR THE PURPOSE OF SECURING CREDIT.

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. APPLICANT AUTHORIZES **RUXER FORD LINCOLN, INC OR RUXER TRUCK CENTER** TO CHECK CREDIT HISTORY AND TO PROVIDE AND/OR OBTAIN CREDIT INFORMATION.

AUTHORIZED SIGNATURE _____ DATE _____

PRINTED
NAME _____ TITLE _____

Please Fax to 812-634-2119 Attn: Business Office