

Union City Truck Center  
4000 Jonesboro Rd Union City GA 30291  
**COMMERCIAL CREDIT APPLICATION**

**BUSINESS INFORMATION**

Name:

Business Type (check one) Corporation:      LLC:      Partnership:      Sole Proprietorship:

Time in Business:      EIN:      Phone:

Current address:

City:      State:      ZIP Code:

Own    Rent    (Please circle)      Monthly payment or rent:      How long?

Previous address:

City:      State:      ZIP Code:

Owned    Rented    (Please circle)      Monthly payment or rent:      How long?

Principal Owner Name:      % Ownership      Date of Birth:

Co-Owner Name      % Ownership      Date of Birth:

Company Gross Monthly Income      Company Bank

**CO-APPLICANT/ PERSONAL GUARANTOR INFORMATION**

Name:

Date of birth:      SSN:      Phone:

Current address:

City:      State:      ZIP Code:

Own    Rent    (Please circle)      Monthly payment or rent:      How long?

Previous address:

City:      State:      ZIP Code:

Owned    Rented    (Please circle)      Monthly payment or rent:      How long?

**EMPLOYMENT INFORMATION**

Current employer:

Employer address:      Time at Job

Phone:

City:      State:      ZIP Code:

Position:      Annual income:

Previous employer:

Address:

Phone:

City:      State:      ZIP Code:

Position:      Annual income:

Date:      Signature:      Print Name      Title: