



UTILITY/KEYSTONE TRAILER SALES, INC

1976 AUCTION RD. PO BOX 156
 MANHEIM, PA 17545
 717.653.9444 FAX 717.653.9443

Salesman _____

EQUIPMENT CREDIT APPLICATION

Please fill in all information for application to be processed

Full Name _____ Home Phone _____

Social Security # _____ Cell Phone _____

Driver's License # _____ Date of Birth _____

Present Address _____

How Long at Present Address _____ yrs _____ mos _____ rent _____ own

Email Address: _____

Corporate Name _____ Tax ID # _____

Corporate Address _____

Date Incorporated _____ State _____ Tax Exempt? _____ ICC/MC # _____

How Long As Owner Operator? _____ As Driver? _____

What Do You Haul? _____ Between What Points? _____

Hauling References:

Company	Contact	Phone #

Truck & Equipment Owned:

Year	Make	Financed By	Account #	Phone #

Trailers Owned:

Year	Make	Financed By	Account #	Phone #

Industry Reference:

Name	Address	Phone #

Bank Reference:

Bank	Local Branch	Contact	Phone #

Insurance Information

Agency	Address	Contact	Phone #

Bankruptcy Last 10 Years? _____ Any Items Repossessed? _____

The above information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Utility/Keystone Trailer Sales, Inc., its designee, assigns or potential assigns to investigate my/our credit worthiness and I/we will provide financial statements, tax returns, etc. as deemed necessary.

Applicant Signature _____ Date _____