

Business Type	Fleet Size	Customer classification	Private Traditional	Vocation
Individual			<input type="radio"/> Yes <input type="radio"/> No	

Primary Customer

Last Name: _____ Zip: _____-____-____ Day Phone: (____)____-____
 First Name: _____ County: _____ Fax Phone: (____)____-____
 MI _____ Suffix: _____ Date of Birth: _____ Other Phone (Cell): (____)____-____
 Address: _____ SSN: _____ E-Mail: _____
 City: _____ State: _____ Marital Status: _____
 Legal Name: _____ DBA Name (if any): _____
 Hauling Hazardous Materials Yes No

Co-Signers/Guarantors/Co-Purchaser

Name	City	State	Type
_____	_____	_____	_____
_____	_____	_____	_____

Operating Information

Number of tractors and trucks owned/leased Total: _____ International: _____ Trailers: _____
 Previously Financed Through Navistar Financial Corporation, Navistar Leasing Company, and/or Navistar Leasing Services Corporation.
 Yes No
 Experience since: _____ As Owner: _____ As Driver: _____
 Equipment Garaging Location/s: Address: _____ Address: _____
 City: _____ State: _____ City: _____ State: _____
 Commercial Drivers License #: _____ Commercial Drivers License State: _____
Previously Filed For Bankruptcy? Yes No **Previous Repossession?** Yes No
 Previous Bankruptcy Date: _____ Type: _____ Previous Repossession Date: _____
 Comments: _____

Haul Source

Current	Business Name	Materials Hauled	Start Date	Contact Name	Business Phone	Contract/Lease Type	Monthly Income	Miles/Year
	_____	_____	_____	_____	(____)____-____	_____	_____	_____
	_____	_____	_____	_____	(____)____-____	_____	_____	_____

Driver Information

Complete This Section If Truck Is To Be Operated By A Hired Driver

Last Name: _____ City: _____ State: _____
 First Name: _____ MI _____ Zip: _____-____-____
 Address: _____ Phone: (____)____-____ Start Date: _____

Financing Information

Who Financed/Leased Previous Truck/Tractor/Trailer Purchases?

Name of Lender	Acct. Number	Contact Name	Business Phone	City	State
_____	_____	_____	(____)____-____	_____	_____
_____	_____	_____	(____)____-____	_____	_____
_____	_____	_____	(____)____-____	_____	_____

Other Loans and Installment Obligations:

Name of Lender	Business Phone	Account Number	Balance Unpaid	Monthly Payment
_____	(____)____-____	_____	_____	_____
_____	(____)____-____	_____	_____	_____
_____	(____)____-____	_____	_____	_____

Other Information:

Nearest Relative Not Living With Me: _____ Relationship: _____
 Address: _____ City: _____ State: _____
 Zip: _____-____-____ Phone: (____)____-____

Other Additional Information

(WE) ACKNOWLEDGE RECEIPT OF NOTICE IN COMPLIANCE WITH THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT IF APPLICABLE. THE FOREGOING APPLICATION HAS BEEN CAREFULLY READ (BOTH PRINTED AND WRITTEN MATTER) AND IS IN ALL RESPECTS COMPLETE, ACCURATE, AND TRUTHFUL. THIS APPLICATION IS GIVEN FOR YOUR SOLE USE AND INFORMATION AND IS NOT TO BE DIVULGED TO OR USED BY ANYONE ELSE PROVIDED, HOWEVER, THAT THE UNDERSIGNED HEREBY AUTHORIZES THE ABOVE NAMED BANK(S), TRADE AND/OR OTHER CREDIT REFERENCE(S) TO RELEASE SUCH INFORMATION AS IS NECESSARY TO ESTABLISH CREDIT WITH YOU OR YOUR COMPANY. THE UNDERSIGNED ALSO AUTHORIZES AND CONSENTS TO NAVISTAR FINANCIAL CORPORATION, NAVISTAR LEASING COMPANY, AND/OR NAVISTAR LEASING SERVICES CORPORATION REQUESTING MY/OUR CREDIT REPORT.

(WE) FURTHER REPRESENT THAT SAID EQUIPMENT SHALL BE USED FOR A COMMERCIAL PURPOSE AND NOT BE USED FOR ANY UNLAWFUL PURPOSE.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

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Signature of Guarantor: _____ Date: _____