



CUSTOMER PROFILE

Date: _____

GENERAL:
Company Name: _____
Address: _____
City/State/Zip: _____ Phone: _____
Fax: _____ E-Mail: _____
Contact Person: _____ Title: _____
 Corporation Individual Partnership LLC
Federal Tax ID #: _____ Year Started: _____ Years in Business: _____
Equipment Location (if different from above): _____

1. Principal/Owner Name – Ownership _____ %
Address: _____ City/State/Zip: _____
Phone: _____ Fax: _____ SS#: _____
2. Principal/Owner Name – Ownership _____ %
Address: _____ City/State/Zip: _____
Phone: _____ Fax: _____ SS#: _____
Name of Person Authorized to Sign Documents (print name): _____
Signature: _____ Title: _____

EQUIPMENT PURCHASED
Year: _____ Series: _____ Model: _____
Description: _____ Cost: _____
Year: _____ Series: _____ Model: _____
Description: _____ Cost: _____
Year: _____ Series: _____ Model: _____
Description: _____ Cost: _____
Replacement Units: Yes No If “Yes”- current payment(s): \$ _____

USAGE OF EQUIPMENT
Estimated miles driven annually (per vehicle): _____
Seating: Forward Facing Perimeter Engine: Gasoline Diesel Alternate Fuel
Other Options/Accessories: _____

Intended Use: _____

PROGRAM REQUEST

Loan Lease TRAC Lease Other _____

Term: _____ Program: _____

FLEET INFORMATION

Fleet Total: _____

Year: _____ Make: _____ Model: _____ Lease/Loan: _____

Monthly Payment: _____ Creditor: _____ Balance: _____

Year: _____ Make: _____ Model: _____ Lease/Loan: _____

Monthly Payment: _____ Creditor: _____ Balance: _____

Year: _____ Make: _____ Model: _____ Lease/Loan: _____

Monthly Payment: _____ Creditor: _____ Balance: _____

Year: _____ Make: _____ Model: _____ Lease/Loan: _____

Monthly Payment: _____ Creditor: _____ Balance: _____

Year: _____ Make: _____ Model: _____ Lease/Loan: _____

Monthly Payment: _____ Creditor: _____ Balance: _____

SIGNATURES

The undersigned certifies that the above information given for credit purposes is true and correct and authorizes Bus Group, Inc. and /or any credit bureau or investigative agency to investigate the references, statements or other data listed or accompanying this application. The undersigned authorizes all parties contracted to release credit and financial information requested as a part of said investigation. It is understood that this profile is not a commitment to finance.

Borrower Name

Completed By (print)

Signature

Title

Date

Principal/Owner (if applicable)

Date

Principal/Owner (if applicable)

Date

Notice:

All transactions/relationships that exceed \$100,000 and some transactions/relationships under \$100,000 will need to be accompanied by the most recent two years Federal Tax Returns (Corporate and/or individual) as well as the most recent two years CPA prepared financial statements (including footnotes, if any). If the most recent year end financial statement is older than six months, an interim financial statement will be required.