



BUSINESS INFO.

Full Legal Company Name:	Office Ph:	Year Business Started:
Trade Name or DBA:	Fax #:	No. of Employees:
Street Address	Business Structure: Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Sole Proprietor <input type="checkbox"/>	
City, State, Zip:	CA#	DOT#

OWNER / PRINCIPAL (Other entities see pg. 2)

<u>Owner 1</u> – Name:	Title:	Social Security No.:	% Ownership:
Home Address:	Unit#:	Email:	Homeowner: Yes <input type="checkbox"/> No <input type="checkbox"/>
City, State	Zip:	Cell Ph:	Drivers License:
<u>Owner 2</u> – Name:	Title:	Social Security No.:	% Ownership:
Home Address:	Unit#:	Email:	Drivers License:
City, State	Zip:	Cell Ph:	Homeowner: Yes <input type="checkbox"/> No <input type="checkbox"/>
Name/Address of Nearest Living Relative:			Relative's Home Ph:

INSURANCE

Name	Telephone	Policy No.	Contact

FINANCE ACCOUNTS (Leases/Loans)

Name & Address	Account No.	Contact	Telephone

MAJOR SOURCES OF INCOME

Customer Name	How Long?	Contact	Phone Number

- Have you ever been bankrupt? No Yes; What Year?
- Have you ever had equipment repossessed? No Yes;
- Are you a defendant in any legal action? No Yes
- Do you have any unpaid tax liens or judgments on your credit? No Yes
- Are you making payments on tax liens or judgments? No Yes
- Are you a co-maker, endorser, or guarantor on any debts of others? No Yes

If "YES" to above questions, please explain:

The undersigned hereby certifies that all statements contained in this application and any financial information provided in connection with the credit applied for are true and complete and are made for the purpose of inducing PRODUCTIVE Finance, LLC to extend credit to the undersigned. Any copies of tax returns being provided are copies of "As-Filed" returns missing only Original signatures. PRODUCTIVE Finance, LLC is relying upon this representation in its credit approval process.

I authorize PRODUCTIVE Finance, LLC to obtain information as it may require for the purpose of extending credit. The application and any financial information provided shall remain the property of PRODUCTIVE Finance, LLC whether or not credit is granted. I agree to notify you of any material change in the condition of my affairs, and this statement shall be considered by you to be a continuing statement of financial condition of the undersigned until written notice to the contrary is received by you.

Signature	Title	Date
Signature	Title	Date

PARTNERSHIP

Registered Trade Name:		Place (State) of Registration:	
Partner 1 Interest _____% <input type="checkbox"/> General <input type="checkbox"/> Limited	Partner 2 Interest _____% <input type="checkbox"/> General <input type="checkbox"/> Limited		
Name _____	Name _____		
Social Security Number* _____	Social Security Number* _____		
Home Address _____	Home Address _____		
City/State/Zip _____	City/State/Zip _____		
Partner 3 Interest _____% <input type="checkbox"/> General <input type="checkbox"/> Limited	Partner 4 Interest _____% <input type="checkbox"/> General <input type="checkbox"/> Limited		
Name _____	Name _____		
Social Security Number* _____	Social Security Number* _____		
Home Address _____	Home Address _____		
City/State/Zip _____	City/State/Zip _____		

CORPORATION

Full Corporate Name:		Place (State) of Registration:	
Federal Tax ID	State of Incorporation	Date of Incorporation	
President Stock Ownership _____%	Vice President Stock Ownership _____%		
Name _____	Name _____		
Social Security Number* _____	Social Security Number* _____		
Home Address _____	Home Address _____		
City/State Zip _____	City/State/Zip _____		
Secretary Stock Ownership _____%	Treasurer Stock Ownership _____%		
Name _____	Name _____		
Social Security Number* _____	Social Security Number* _____		
Home Address _____	Home Address _____		
City/State Zip _____	City/State/Zip _____		

LIMITED LIABILITY COMPANY

Registered Name:		Place (State) where Articles of Organization are recorded:	
Federal Tax ID:	Date Recorded:	Recording No.:	
President Ownership Int. _____%	Vice President Ownership Int. _____%		
Member Name _____	Member Name _____		
Social Security Number* _____	Social Security Number* _____		
Home Address _____	Home Address _____		
City/State Zip _____	City/State/Zip _____		
Secretary Ownership Int. _____%	Treasurer Ownership Int. _____%		
Member Name _____	Member Name _____		
Social Security Number* _____	Social Security Number* _____		
Home Address _____	Home Address _____		
City/State Zip _____	City/State/Zip _____		

***Required of all personal guarantors.**

ADDENDUM TRUCK USAGE

Purchaser to Drive? <input type="checkbox"/> Yes <input type="checkbox"/> No (If NO , provide information on person who will drive truck.)		Driver's Name		Relationship to Purchaser	
Address					
License Number	State	Date	How long as Owner/Operator	Years of experience	Relationship to Purchaser
Equipment Use: <input type="checkbox"/> Expand existing business <input type="checkbox"/> Replace old equipment <input type="checkbox"/> Start new business				# of Power Units	# of Trailers
Truck to Work For (Company Name)			Contact		
Address				Phone	
Products Hauled	Off Highway Use <input type="checkbox"/> Yes <input type="checkbox"/> No		Trucking (Between what points)		Average Mileage per Month



PRODUCTIVE FINANCE, LLC
 Discover the Value of Independence
 630 N. Rosemead Blvd., Suite 200 - Pasadena, CA 91107
 Phone: (626) 932-5700 - www.productivefinance.com

PERSONAL FINANCIAL STATEMENT

NAME	Last	First	Middle	Social Security No.
ADDRESS:				Driver's Lic. No.
				Phone No.

ASSETS:		LIABILITIES AND OWNER'S EQUITY:	
Cash on Hand or in the Bank	_____	Accounts Owing	_____
Govt. Bond or Other Securities	_____	Notes or Mortgages Owing	_____
Accounts Receivable	_____	Taxes Payable this Year	_____
Equipment	_____	Equipment Contracts	_____
Land and Buildings	_____	Other Liabilities	_____
Inventory	_____		_____
Other Assets	_____	TOTAL LIABILITIES (L)	_____
TOTAL ASSETS (A)		OWNER'S EQUITY (A)-(L)	

Have you ever been bankrupt?	<input type="checkbox"/> No	<input type="checkbox"/> Yes; What Year?
Have you ever had equipment repossessed?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are you a defendant in any legal action?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Do you have any unpaid tax liens or judgments on your credit?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are you making payments on tax liens or judgments?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are you a co-maker, endorser, or guarantor on any debts of	<input type="checkbox"/> No	<input type="checkbox"/> Yes
If "yes" to above questions, please explain: _____		

INCOME:		EXPENSES:	
Salaries and Wages	_____	Rent or Home Mortgage	_____
Bonus/Commission	_____	Living Expenses	_____
Dividends	_____	Income Taxes	_____
Rental Income	_____	Other Loan Payments	_____
Other	_____	TOTAL EXPENSES (E)	_____
TOTAL INCOME (I)		EXCESS (I)-(E)	

BANK INFORMATION
 (Please attach most recent two months' bank statements for all accounts.)

REAL ESTATE			
Description	Location		Title in Name of
Purchase Date	Purchase Price	Present Value	Mortgage
Description	Location		Title in Name of
Purchase Date	Purchase Price	Present Value	Mortgage

The undersigned hereby certifies that all statements contained in this financial statement submitted are true and complete, and are made for the purpose of inducing PRODUCTIVE FINANCE, LLC to extend credit to the undersigned. PF is authorized to verify or check references, as they deem necessary.

 Applicant's Name (Please print)

 Applicant's Signature

 Date