



P.O. BOX 2250 – DECATUR, AL 35609-2250
 Phone: 800-332-9140 (ext 3032)
 Fax: (256) 260-1955
 Email: IBSExtended@bibank.com

| |
|-----------------------------------|
| Dealer # _____ |
| Is Customer Waiting? Yes / No |
| Date Needed _____ / _____ / _____ |
| If Sale Pending \$ _____ |
| Reply to _____ |
| Phone (____) _____ - _____ |

CREDIT APPLICATION – EXTENDED FINANCING

Trade Name _____ Legal Name _____

Physical Address _____ City _____ State _____ Zip _____

Billing Address _____ City _____ State _____ Zip _____

Former Address (5yr minimum) _____ City _____ State _____ Zip _____

Job Site Address _____ Job Site Phone # (____) _____

Phone# (____) _____ - _____ Fax# (____) _____ - _____ Cell Phone# (____) _____ - _____ Social Security # _____ - _____ - _____

Email address _____ Website _____

Please select one: Proprietorship Partnership, LP or LLP LLC Municipality Corporation - If so, State of Incorporation _____

Fed ID# _____ - _____ **Business start date** _____ / _____ / _____ If applicable, what is the current number of trucks in fleet or operation _____

Has applicant ever filed for BANKRUPTCY? Yes / No When? _____

Home Office/Parent Co. _____ City/State _____ Name and title of person to contact _____

Company Principals _____ Title _____

Additional Principals _____ Title _____

Purchase Orders required? Yes / No Authorized person(s) to issue P.O. _____

Most recent Fiscal Year End (ex 12/31/12 or 03/31/13): _____ **Annual revenues \$** _____

Depreciation expense \$ _____ **Total of current monthly debt/lease payments \$** _____ **Net Profit/Loss \$** _____

Credit guidelines are based on information received from bank(s) and references. Please provide your largest trades or unsecured creditors, and any companies that you have rented/leased equipment from in the past. Please list references related to your type business or industry. **If trade sheet and/or financial statement can be provided, please forward with credit application.**

Bank Name & Branch _____ City/State _____ Account# _____

Bank Officer in charge of account _____ Email Address _____ Phone (____) _____ - _____

| Company Name | City | State | Phone Number | Fax Number | Email |
|--------------|------|-------|--------------|------------|-------|
| | | | | | |
| | | | | | |
| | | | | | |

The above information is given for the purpose of obtaining credit. The applicant, by and through its duly authorized officer signed below, in addition to the guarantors named below (collectively "I" or "We") warrant that all of the information is true. We affirm that we are financially able to meet our obligations, and will remit in accordance with the terms. I/We hereby direct all of the creditors named in the application to release to Interstate Billing Service, Inc. (IBS), Bank Independent (BI), or its representatives, such information with regard to my/our financial condition as may be reasonably requested by IBS/BI. I/We authorize IBS/BI to obtain a consumer credit report on my/our personal credit history if necessary, in accordance with the Federal Fair Credit Reporting Act, and to use this report in making decisions concerning my/our credit worthiness for an account. I/We understand a personal guaranty may be required. If I/We refuse to sign this application, I/We will not be considered as a candidate for credit with IBS/BI. A credit guideline may be established at the discretion of IBS/BI. Applicant agrees to pay any collection costs incurred to collect any unpaid balance, including interest thereon, as allowed by state law, and any related attorney's fees. I/We agree not to assert any claims or defenses, including the right of offset against the accounts/invoices purchased by and/or assigned to IBS/BI from any dealer. My/Our use of this credit constitutes acknowledgement of and agreement to the terms and conditions set forth by IBS/BI, as such terms and conditions may change from time to time in the sole discretion of IBS/BI. This agreement shall be governed by and construed according to the laws of the State of Alabama. I/We submit to the jurisdiction of any Alabama State or Federal Court sitting in the Northern District of Alabama over any action arising hereunder and agree that all claims will be brought in such Alabama State or Federal Court. I/We further waive any objection on the basis of forum non-conveniens. As required by Section 4107(d)(2) of the Small Business Jobs Act of 2010, applicant hereby certifies to IBS and its affiliates that the principals of applicant and its affiliates have not been convicted of, or pleaded *nolo contendere* to, a sex offense against a minor (as such terms are defined in section 111 of the Sex Offender Registration and Notification Act (42 U.S.C. 16911)). If this application is approved, your account has been **assigned** to and/or purchased by IBS/BI. Payment terms will be reflected on the monthly statement and/or invoice. If your business should sell or close, it is the applicants' responsibility to advise IBS/BI immediately.

With which dealer do you wish to charge? _____
(Application will apply to any additional IBS dealers that your company should charge with now or in the future)

Signature _____ **Title/Position** _____ **Date** _____

The undersigned (whether one or more, the "Guarantor") individually, jointly, severally, absolutely, independently, and unconditionally guarantees the prompt payment when due of all amounts owed by the applicant named above to Interstate Billing Service, Inc. and Bank Independent, including reasonable attorney's fees. This guaranty applies to any and all debts owed to Interstate Billing Service, Inc. and Bank Independent.

Signature _____ Date _____
 Printed Name _____
 Social Security # _____ - _____ - _____ DOB _____ / _____ / _____

Signature _____ Date _____
 Printed Name _____
 Social Security # _____ - _____ - _____ DOB _____ / _____ / _____