

CREDIT APPLICATION FOR OTR BUSINESS ENTITIES

Business Name _____
Address _____
City/State _____

Contact _____
Title _____
Phone # _____

Federal Tax ID (EIN) number: _____ Years in Business: _____

Corporate Tax Structure: "C" Corp "S" Corp LLC Proprietorship

Officers / Key Managers:

Name / Title	Social Security #	Stock Ownership %	Years with Co.	Years Experience
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Type of Carrier: LTL Truckload Private Hazardous Cargo

Top Five Customers:

	Phone/Contact	Annual Revenue \$	% Revenue
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____
5) _____	_____	_____	_____

Receivable Aging:

_____ % _____ % _____ % _____ %
0-29 Days 30-59 Days 60-89 Days >90 Days

Fleet Makeup:	# Financed	# Leased (Capitalized)	# Leased (Operating)	# Units Owned (F&C)	Total Units
Tractors:	_____	_____	_____	_____	_____
Trucks:	_____	_____	_____	_____	_____
Trailers:	_____	_____	_____	_____	_____

	Tractors:	Trucks:	Trailers:
Typical Trade Cycle (months)	_____	_____	_____
Average Age (years)	_____	_____	_____

Driver Information: Average Driver Turnover (annual): _____ % Number Owner-Operators Used: _____
Annual Mileage for Team Operators: _____ Number of Company Teams: _____
Annual Mileage for Single Operators: _____ Number of Independent Teams: _____

Terminals:

Number of Terminals Leased _____ Number of Terminals Owned _____
Locations _____

Creditor Information (Truck and Trailer):

Company	Phone Number and Contact Name	Account Number	Collateral
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Bank Information: (Depository and Loans)

Name	Phone Number and Contact Name	Account Number	Collateral
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Bank Information: (Operating Line of Credit)

Name	Phone Number and Contact Name	Line Amount	Average Balance	Renewal Date
_____	_____	_____	_____	_____

Insurance: Physical Damage Deductible \$ _____ Liability Limit \$ _____
 Umbrella Policy Limit \$ _____

Current Transaction:

Number of units to be purchased / leased _____ Number of Trades or Disposals _____

AUTHORIZATION TO RELEASE CREDIT INFORMATION

The undersigned certifies that all of the information contained herein or provided in connection with this Application is true and correct and accurately describes the financial condition of the Customer(s) as of the date hereof. I will notify DaimlerChrysler Services North America LLC ("DCS") or other lender ("Lender"), if I become aware of any material change in the financial condition of the Customer(s). I hereby authorize DCS or Lender to make inquiry into, to request, and to receive any information concerning my financial condition, including, but not limited to, OBTAINING A CREDIT REPORT AND contacting any current or former creditors of Customer(s) to verify any information contained herein or received in connection with this Application, which DCS or Lender deems relevant to the possible extension of credit to Customer(s). I also grant any such creditors permission to release information relating to my financial condition to DCS or Lender. The foregoing provision shall remain in effect until Customer pays DCS or Lender in full (if DCS or Lender decides to grant credit to Customer(s)).

 Company Name

 Authorized By

 Date

DOCUMENTS REQUIRED FOR REQUESTS IN EXCESS OF \$250,000

- Last three (3) FYE Balance Sheets on Company (see notes)
- Last three (3) FYE Income Statements on Company (see notes)
- Most recent Interim Balance Sheet
- Most Recent Interim Income Statement
- Copy of Summary Page from Accounts Receivable Aging Report
- Current Personal Financial Statements on Owners with 10% or more of stock
- Articles of Incorporation or Organization

NOTES: If FYE Income Statements and Balance Sheets are not prepared by an outside accounting firm, please also include copies of Corporate Tax Returns, including schedules, for the same time period(s).

For consideration, please forward the above information to:

US Mail
 Freightliner of Knoxville, Inc.
 Attn: Gary Hankins
 P.O. Box 36010
 Knoxville, TN 37930-6010

Overnight
 Freightliner of Knoxville, Inc.
 Attn: Gary Hankins
 1413 Everett Road
 Knoxville, TN 37932