Trans	
Advantag	ge.

Sales Rep Name:

Logal Duciness Name:		CO	WPANY	INFORMATION			Corporation	- Dorthory	hin	
Legal Business Name: Tax ID# or SSN:							Corporation	Partners	•	shin
US DOT #:						_				
Street Address:			City:		S	state:	Zip Coo	Je:		
Contact Name/Title:				Phone:			Email:			
 The company is organized and existing a) Is the company a publicly traded b) Is the company a subsidiary of a c) If the company or its parent are 	d entity? a publicly	traded entity? _		_	Drganiz	ed	·			
2. Is the company listed above a For Hire	Transpor	tation Company	: Yes	No	lf ye	es, how many	rtrucks doe	s it operate?		
3. What is the business purpose for the ed								. –		
 Does your company have any equipme Yes No Does your company have any equipme If Yes, list which countries: 	ent that w	ill be located or ill be located or	will trav	ed outside the U.	.S. (incl	uding in a fre			al miles No	;?
6. Please list who will be in control of the	equipme	ent:								
7. Will any payment be sent from a non-d			No							
8. Please list any sanctions countries in whether the second se	hich the c	company, its affil	liates or	subsidiaries con	ducts a	ictivities or h	as assets lo	cated in		
9. OWNERS: Complete this section for all legal owners (individuals or companies) with 10% or more ownership.										
Name		Ownership o	%	Date of Birt	h 1	TIN/SSN	US	Citizen/Enti	ity (Y)	/N)
		•				•				
10. GUARANTORS: Please list all such persons or entities that are guarantors. Please provide the name, ownership %, date of birth (if a person), and indicate if the guarantor is a U.S. citizen or a U.S. entity/subsidiary to an entity based in the U.S. Please note there are two sections below. One section for personal guarantors (section 10A) and one section for corporate guarantors (section 10B).										
10. A) INDIVIDUALS WHO PROVIDE PER	SONAL G	UARANTY - INF	ORMAT	ION						
For individuals who will guarantee the finance request, by sig report on me from one or more credit reporting agencies. If cr	redit is grante	d, I authorize Trans Adv	antage, Inc.	to obtain subsequent co	nsumer cre	edit reports on me	in connection wit	h any update, renew	al or exter	nsion of credit,
collection of the account, or other legitimate business purpose Name:		hip:%	DOB:	ormation about its credi	SSN:	ce with me to othe	rs, including credi	US Citizen		No
Home Address:					Conta	ct Phone:				
Guarantor Signature: x Date Signed:										
Name:	Owners	hip:%	DOB:		SSN:			US Citizen	/es	No
Home Address: Contact Phone:										
Guarantor Signature: x Date Signed:										
Name:	Owners	hip:%	DOB:		SSN:			US Citizen	/es	No
Home Address: Contact Phone:										
Guarantor Signature: x Date Signed:										



Sales Rep Name:

10. B) COMPANIES THAT PROVIDE CORPORATE GUARANTY - INFORMATION

Please list all such entities that are corporate guarantors. Please provide the name, ownership %, Tax ID number, and indicate if the corporate guarantor is a U.S. entity

Company Name	Ownership %	Tax ID #	US Entity Y/N

Verified this: ______ day of ______, 20 _____.

By (Print Name and Title):

Applicant's Signature, Authorized Agent for Business Entity Applicant:

I certify that the information stated in this profile is true and correct to the best of my knowledge and is provided for the purpose of obtaining credit. I understand that you will retain this information whether or not I am approved for credit. I authorize you to contact my creditors and authorize any creditor so contacted to release to you such credit information as you may request. I authorize Trans Advantage to disclose to other lenders my credit application and experience including personal credit bureau reports for purposes of qualifying under such third parties' lending/leasing programs. I further authorize Trans Advantage, Inc., TAI Title Trust, and TAI Capital Company to verify my identity.

By signing above the applicant also attests to the following: no payments will originate from Non- U.S. locations, the entity is not classified as a charity, Non-Government Organization or a Non-Profit Organization, is not a shell bank or a foreign financial institution, the entity does not have the ability to issue bearer shares or bearer share warrants and does not have any outstanding bearer shares, the entity is not a special purpose entity or a special purpose vehicle, the entity or any of its related parties does not engage in the direct sale, distribution or production of marijuana whether independently or directly. The entity does not currently and has no plans to engage in inbound payable upon proper identification transactions. No individual on this customer form serves as a principal shareholder (10% or greater), executive officer or director of any bank. The entity is not a currency dealer or exchanger, does not issue traveler checks, money orders or open loop prepaid cards; the entity is not a check casher, money transmitter or virtual currency exchanger. The entity is not a Non-U.S. Money Service Business or a Mexican Casa De Cambio or a U.S. Money Service business with FinCEN. The entity does not sell, load or reload any closed loop prepaid cards. The entity is not associated with Internet Gambling, as defined by the Unlawful Internet Gambling Enforcement Act. The Act requires banks to identify customers that are associated with Internet Gambling. A customer may be associated with Internet Gambling if the customer: accepts funds for gambling purposes; facilitates a betting proces; offers games to play where monetary winnings may be awarded; or pays out monetary winnings. Activities may include online poker, online easinos, online sports betting, online bingo, or mobile gambling. The entity does not offer marketplace lending or crowdfunding services and does not offer gaming, gambling, or casino services (i.e. slot machines, card tables).

Submission of this form acknowledges agreement with the terms for participation in any and all programs; payment for purchases and all related charges, including but not limited to attorney fees and collection costs under the programs (via statement deduct for agents of UniGroup's van lines unless disallowed by the van line).

If your application is denied whether pursuant to this customer information sheet or any other application for credit you have the right to a written statement of the specific reason for the denial. To obtain this statement, please submit request in writing within 60 days from the date you are notified of our decision, to: Trans Advantage, Inc., One Premier Drive, Fenton, Missouri 63026. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The Federal Equal Opportunity Act prohibits creditors from discrimination against credit applicants on the basis of race, color, religion, national origin, sex, marital state, age (provided the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income is derived from any public assistance program or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agencythat administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC, 20580. Please retain a copy of the completed application for your records.

Please return your completed Customer Profile to your Sales Representative:

Beth Gockel	Beth Gockel@transadvantage.com
Tim Siner	Tim Siner@transadvantage.com
Brian Theobald	Brian Theobald@transadvantage.com
Phil Westermeyer	Phil Westermeyer@transadvantage.com