



Trans Advantage, Inc.
 One Premier Drive, Fenton MO 63026
 800-325-3863 / Fax 636-349-2728

Owner / Operator Credit Application

Sales Rep Name: _____

Please include a copy of your valid photo ID with your completed application

APPLICANT INFORMATION

Applicant's First and Last Name		Social Security #	Birth Date	Country of Citizenship
Complete Address - Street Address, City, State, Zip		Email Address		
Applicant's Legal Business Name, if applicable **		Cell Phone #	Tax ID #	State of Organization
Joint Applicant's First and Last Name, if applicable	Complete Address	Social Security #	Birth Date	Relationship
Has/Have the applicant(s) ever been convicted of a felony? Yes No If yes, please explain:				
Has/Have the applicant(s) ever filed for bankruptcy? Yes No If yes, please explain:				
** For all Applicants who intend to finance using a legal business name, please also complete Additional Information section below.				

REQUESTED EQUIPMENT

Year / Make / Model of Equipment	Purchase Price	Down Payment/Trade-In Value	Seller's Business or Personal Name
Does the Proposed Tractor/Truck Replace one that you own? Yes No			
Will the Proposed Tractor/Truck be Used outside the U.S.? (including in a free trade zone) Yes No If Yes, Where?			
Do you operate any equipment that will be located or will travel within 100 miles of Mexico for more than 25% of its annual miles? Yes No			
# of Tractors/Trucks You Own & Operate Today:	Amount Owed on Current Tractor / Truck (if financed):		

EMPLOYMENT HISTORY – LAST 5 YEARS EMPLOYMENT/HAULING HISTORY REQUIRED

Will You Be Changing Employer or Hauler ? Yes No	If Yes, Prospective Company Name:	Contact Person's Name and Phone #		
Current Employer or Hauler Company Name	Hire Date – Separation Date (MO/YEAR)	Position/Title	Approx. Monthly Gross Income	Check One: ___ Contractor-1099 ___ Employee W-2
Previous Employer or Hauler Company Name	Hire Date – Separation Date (MO/YEAR)	Position/Title	Approx. Monthly Gross Income	Check One: ___ Contractor-1099 ___ Employee W-2
Next Previous Employer or Hauler Company Name	Hire Date – Separation Date (MO/YEAR)	Position/Title	Approx. Monthly Gross Income	Check One: ___ Contractor-1099 ___ Employee W-2
Total Experience as Independent Owner/Operator (1099) # Years: # Months:		Total Experience as Company Driver (W-2) # Years: # Months:		
I authorize Trans Advantage to charge my driver's statement through my Agent's statement. Yes ___ No ___				
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. Yes ___ No ___ Your Initials _____				
I authorize Trans Advantage to contact me via text messages (e.g. SMS/MMS) at the cell number provided above. Messages may be for surveys to improve our customer service, to provide information concerning your contract, purchase or other transactions with us, or for other general business purposes. You agree to notify us if you stop using this number or if you are no longer authorized to receive text messages at this number. To opt-out of receiving text messages at this cellular number please respond with "STOP" to any text message you receive from us, call us at the number above, or email us at: Credit@transadvantage.com Yes ___ No ___ Your Initials _____				

**** Applicants who also have a legal business entity:** Complete the following information regarding your business. If you do not have a business name, please skip this section.

ADDITIONAL INFORMATION – APPLICANT'S LEGAL BUSINESS NAME & INFORMATION

Legal Business Name:	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
Tax ID# or SSN:	<input type="checkbox"/> LLC	<input type="checkbox"/> Sole Proprietorship
US DOT #:		
Street Address:	City:	State: Zip Code:
1. The company is organized and existing under the laws of the state of _____ Year Organized _____		
a) Is the company a publicly traded entity? _____		
b) Is the company a subsidiary of a publicly traded entity? _____		
c) If the company or its parent are publicly traded, on what exchange? _____		
2. Is the company listed above a For Hire Transportation Company: Yes ___ No ___ If yes, how many trucks does it operate? _____		
3. What is the business purpose for the equipment leased or financed? _____		
4. Does your company have any equipment that will be located or will travel within 100 miles of Mexico for more than 25% of its annual miles? Yes ___ No ___		
5. Does your company have any equipment that will be located or operated outside the U.S. (including in a free trade zone)? Yes ___ No ___		
If Yes, list which countries: _____		



ADDITIONAL INFORMATION – APPLICANT’S LEGAL BUSINESS NAME & INFORMATION (continued)

6. Please list who will be in control of the equipment: _____
7. Will any payment be sent from a non-domestic location? Yes ___ No ___
8. Please list any sanctioned countries in which the company, its affiliates or subsidiaries conducts activities or has assets located in.

9. OWNERS: Complete this section for all legal owners (individuals or companies) with 10% or more ownership.

Name	Ownership %	Date of Birth	TIN/SSN	US Citizen/Entity (Y/N)

10. GUARANTORS: Please list all such persons that are guarantors. Please provide the name, ownership %, date of birth, and indicate if the guarantor is a U.S. citizen or a U.S. entity/subsidiary to an entity based in the U.S.

For individuals who will guarantee the finance request, by signing below, the undersigned agrees as follows: I authorize Trans Advantage, Inc. to investigate my credit and employment history and to obtain a consumer credit report on me from one or more credit reporting agencies. I authorize Trans Advantage, Inc. 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. If credit is granted, I authorize Trans Advantage, Inc. to obtain subsequent consumer credit reports on me in connection with any update, renewal or extension of credit, collection of the account, or other legitimate business purposes associated with the account, and to release information about its credit experience with me to others, including credit bureaus, as permitted by law.

Name:	Ownership: _____%	DOB:	SSN:	US Citizen Yes No
Home Address:			Contact Phone:	
Guarantor Signature: x _____		Title: _____		Date Signed: _____
Name:	Ownership: _____%	DOB:	SSN:	US Citizen Yes No
Home Address:			Contact Phone:	
Guarantor Signature: x _____		Title: _____		Date Signed: _____
Name:	Ownership: _____%	DOB:	SSN:	US Citizen Yes No
Home Address:			Contact Phone:	
Guarantor Signature: x _____		Title: _____		Date Signed: _____

If your application is denied, whether pursuant to this application or any other application for credit, you have the right to a written statement of the specific reason for denial. To obtain the statement, please submit request in writing within 60 days from the date you are notified of our decision to: Trans Advantage, Inc., Attn: Credit Department, One Premier Drive, Fenton, MO 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 discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that 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 agency that 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.

If the undersigned is an individual or sole proprietor, the undersigned further agrees as follows: I authorize Trans Advantage, Inc., TAI Title Trust, and TAI Capital Company to verify my identity. I authorize Trans Advantage, Inc. to investigate my credit and employment history and to obtain a consumer credit report on me from one or more credit reporting agencies. 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. If credit is granted, I authorize Trans Advantage, Inc. to obtain subsequent consumer credit reports on me in connection with any update, renewal or extension of credit, collection of the account, or other legitimate business purposes associated with the account, and to release information about its credit experience with me to others, including credit bureaus, as permitted by law. I certify that the information stated in this application 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.

If the undersigned is an applicant applying with a legal business entity, the undersigned agrees as follows: I certify that the information stated in this application 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 and verify the corporate identity.

By signing below 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 that includes 25% or more ownership by a Mexican Casa De Cambio. The entity is not registered as 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 process; offers games to play where monetary winnings may be awarded; or pays out monetary winnings. Activities may include online poker, online casinos, 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).

Notice: To help the government fight the funding of terrorism and money laundering activities, U.S. Federal law requires financial institutions to obtain, verify and record information that identifies each person (individuals or businesses) who opens an account. What this means for you: When you open an account or add any additional service, we will ask you for your name, address, taxpayer identification number that will allow us to identify you. We may also ask to see other identifying documents.

Applicant’s Signature _____ Date _____ Joint Applicant’s Signature (if applicable) _____ Date _____