

**TNT FLEET SUPPLY, LLC.**  
**3000 SOUTH CORPORATE PKWY, SUITE 400**  
**FOREST PARK, GEORGIA 30297**  
**404-675-9361 FAX: 404-675-9365**

**APPLICATION FOR CREDIT**

COMPANY OR INDIVIDUAL NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

SHIPPING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

PHONE# \_\_\_\_\_ IS PURCHASE ORDER REQUIRED? \_\_\_\_\_

FAX# \_\_\_\_\_ BUSINESS ACTIVITY \_\_\_\_\_

**BUSINESS INFORMATION**

TYPE OF BUSINESS: \_\_\_\_\_ CORPORATION \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ SOLE PROPRIETRSHIP

YRS . IN BUSINESS \_\_\_\_\_ DATE INCORPORATED \_\_\_\_\_ STATE OF INCORPORATION \_\_\_\_\_

FEDERAL ID# \_\_\_\_\_ IF SOLE PROPRIETRSHIP SS# \_\_\_\_\_

PRESIDENT \_\_\_\_\_ VICE PRESIDENT \_\_\_\_\_

CONTROLLER \_\_\_\_\_ PARTS MANAGER \_\_\_\_\_

If all parts purchased from TNT Fleet Supply, LLC. will be resold in the form of tangible personal property, indicate and provide the following:

SALES TAX EXEMPTION # \_\_\_\_\_ PLEASE SIGN TAX FORM & ATTACH

**BANK REFERENCES and INFORMATION RELEASE**

PRIMARY BANK \_\_\_\_\_

BANK ADDRESS \_\_\_\_\_

ACCOUNT# \_\_\_\_\_

PHONE# \_\_\_\_\_ CONTACT \_\_\_\_\_

To establish credit or update credit information, we authorize the bank indicated above to provide account balances, loan information and other pertinent information to TNT Fleet Supply, LLC.

**TRADE REFERENCES**

PLEASE LIST FIVE CURRENT TRADE REFERENCES

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

**TNT FLEET SUPPLY, LLC.**  
**APPLICATION FOR CREDIT continued – PAGE 2**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

**LINE OF CREDIT REQUESTED \$** \_\_\_\_\_

**PERSONAL GUARANTEE:**

I certify that I am authorized to sign this credit application on behalf of debtor, and I authorize TNT Fleet Supply, LLC. or its assigns, to whom this application is made, or their agent, to investigate our credit worthiness and hereby authorize the references herein named to provide all information requested by creditor. All equipment and/or parts shall remain the property of TNT Fleet Supply, LLC. until full payment is received. All invoices are due 10 days following the end of the month. Any invoice or portion thereof past due shall accrue a finance charge of 1½% per month or the highest lawful rate on the past due amount. I agree to meet these terms and agree that all claims or disputes be resolved in the State of Georgia. If any invoices are placed for collection, all costs and expenses incurred in collection, including reasonable attorney fees will be included in any judgment rendered hereunder. In consideration of your extending credit, I/WE jointly, severally and unconditionally guarantee payment when due, of any and all past, present or future indebtedness owed to you by the above named firm or individual applicant and agree to pay such indebtedness if default in payment thereof be made by the debtor. I have read and understand the above.

SIGNATURE \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

PRINT NAME \_\_\_\_\_ DATE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

**VERIFICATION AND SALESPERSON INFORMATION-PLEASE DO NOT WRITE IN SPACE BELOW.**

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EXPECTED CREDIT REQUIREMENTS \$ \_\_\_\_\_ SALESPERSON \_\_\_\_\_

REFERENCES CHECKED BY \_\_\_\_\_ CREDIT APPROVED BY \_\_\_\_\_

TERRITORY \_\_\_\_\_ CUSTOMER TYPE \_\_\_\_\_

**Please return to:**

Fax: (404) 675-9365

Email: tallen@tntpartsinc.com

**Statements**

- Mailed
- E-mailed
- Faxed
- None

Company Name: \_\_\_\_\_

Email: \_\_\_\_\_

Fax: \_\_\_\_\_

Phone: \_\_\_\_\_

**Invoices**

- Mailed
- E-mailed
- Faxed
- None
  
- Will accept reprints of invoice copies needed
- Must have signed copy of invoices needed