



SELECTTRANSPORTATION RESOURCES, LLC
Confidential Business Credit Application



Houston Freightliner, Inc. • Corpus Christi Freightliner, Inc. • Beaumont Freightliner, Inc. • Thomas Bus Gulf Coast GP, Inc.
American LaFrance Gulf Coast • SelecTrucks of Houston, LLC • SelecTrucks of Houston Wholesale, LLC
9550 North Loop East, Houston, TX 77029 Main: (713) 672-4115 Fax: (713) 676-1603 Attn: John Garwood

Applicant's Business Name (with d/b/a)			Credit Limit Requested	Date of Application	<input type="checkbox"/> Corporation <input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company
Physical Street Address (Do not include PO Boxes)				City	State	Zip Code
<input type="checkbox"/> Own <input type="checkbox"/> Rent	Landlord Name	Landlord Address	City	State	Zip Code	
Mailing Address			City	State	Zip Code	
Phone Number	Cell Phone Number	Fax Number	E-Mail Address			
Federal Tax ID Number	Dun & Bradstreet Number	Texas Resale Number (Attach Form)	Charter Number (for corporations)	State		
PO Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Estimated Monthly Purchases?	Parts \$	Service \$	Body Shop \$		
OWNERSHIP & MANAGEMENT INFORMATION SECTION (ATTACH ADDITIONAL SHEETS IF NECESSARY)						
Officer, Director, Stockholder Name		Position Held	Percentage Held	Social Security Number	DL# & State	
Street Address			City	State	Zip Code	
Officer, Director, Stockholder Name		Position Held	Percentage Held	Social Security Number	DL# & State	
Street Address			City	State	Zip Code	
Officer, Director, Stockholder Name		Position Held	Percentage Held	Social Security Number	DL# & State	
Street Address			City	State	Zip Code	
CREDIT REFERENCES						
Business Name / Financial Institution		Contact Name	Amount Owed	Account Number	Fax Number	
Mailing Address			City	State	Zip Code	
Business Name / Financial Institution		Contact Name	Amount Owed	Account Number	Fax Number	
Mailing Address			City	State	Zip Code	
Business Name / Financial Institution		Contact Name	Amount Owed	Account Number	Fax Number	
Mailing Address			City	State	Zip Code	

Please fill the application out completely to avoid any delays

BANK REFERENCE				
Bank Name	Contact Name	Balance	Account Number	Phone Number
Mailing Address		City	State	Zip Code

PLEASE ATTACH THE FOLLOWING TO THIS APPLICATION PRIOR TO SUBMITTING VIA MAIL OR FAX:

- 1.) Complete current financial statement including balance sheet and income statement.
- 2.) Texas Tax Exempt Certificate if applying for nontaxable transactions.
- 3.) A copy of a recent utility bill showing the applicant's name and address.
- 4.) A certificate of good standing from the Secretary of State / Comptroller of the state of incorporation if other than a proprietorship.
- 5.) A Resolution from the Board of Directors authorizing the borrowing of money if a corporation.
- 6.) A copy of the drivers license of the individual signing the application

CERTIFICATION AND AUTHORIZATION

For the purpose of establishing and maintaining credit, the undersigned ("Applicant") submits the foregoing statement and information contained on this Application, both written and printed, and including supplemental sheets, if any, for himself and for the business named herein (hereinafter sometimes "Company") as being a full, true, and correct statement of financial condition and all above matters, on the date signed. The undersigned agrees to notify you immediately in writing of any materially unfavorable change in the Company's financial condition or the above matters, and in the absence of such notice or of a new and full written statement, all matters hereinabove may be considered as a continuing statement and substantially correct. The undersigned hereby acknowledges that the creditor (hereinafter sometimes "Vendor") is relying on this information to extend credit and authorizes the Vendor to make inquiry into, to request, and to receive any information concerning the credit and general reputation of the Company and the undersigned, and all information from creditors which the and/or creditor deems relevant for the granting and collection of the proposed borrowing. This authorization will be effective from the date upon which this application is signed and it shall be continuing so long as credit is extended. Upon written request from Vendor, additional information within the scope of this inquiry will be timely provided.

The undersigned further represents that (1) the undersigned has express authority to execute the application for the Company; (2) neither the undersigned nor any principal, officer or manager of the Company has any record of reputation of having violated any federal or state laws relating to liquor, narcotics or contraband; and no such person has been convicted of any felony; (3) the undersigned for himself and the Company agrees to hold creditor harmless and indemnify it from damages suffered by reason of any materially false or misleading statement or representation contained herein and in consideration of credit extended to the Company by Vendor, grants Vendor a right of offset against any obligation Vendor may now or in the future owe the company; and (4) an executed facsimile copy of this application and the undersigned signature shall be for all purposes set out herein the equivalent of a properly executed original.

The undersigned acknowledges for himself and the Company that payment shall be made 10 days from date of invoice and for himself and the Company agrees to pay all invoices, statements, and or bills for goods, wares, merchandise, parts received and/or services rendered on or before the 10th day following the date of invoice and personally and unconditionally guarantees payment of the same for himself, the Company and any business entity named hereinabove. The undersigned acknowledges and agrees that in the event any invoice, statement, or bill is not timely paid in full within 30 days of the due date, interest will immediately begin to accrue on the following day at the highest limit allowed by law or 18% whichever is less.

GUARANTEE

In consideration of credit and financial accommodations extended and to be extended to the Applicant and/or the Company hereafter, the undersigned, whether one or more, have each, jointly and severally, unconditionally, PERSONALLY AND IN HIS/HER CAPACITY AS AN INDIVIDUAL, guaranteed and do guarantee to the Vendor, the payment and collection of each and every invoice, statement, claim, demand, indebtedness and cause of action of every nature whatsoever the undersigned and/or the Company now owe or in the future may owe to Vendor, due or to become due, together with interest as it may accrue and attorneys' fees and costs as may be awarded by a court of competent jurisdiction, which by my signature below I acknowledge and agree should be in an amount not less than 25% of outstanding indebtedness which is a reasonable fee.

The undersigned agree that possession of this guaranty by Vendor constitutes true and correct execution and delivery of this guaranty. The undersigned waives notice of acceptance and of liability to which it applies and waives presentment and demand for payment, notice of dishonor or nonpayment, collection or instigation or suit or any other action against the Company in collection thereof and demand for payment on any party or the Company. All payments due hereunder shall be due at the office of Vendor.

Without impairing or releasing the undersigned or the Company, the Vendor may, without notice and without impairing any liability hereby guaranteed, (1) change the manner or place and payment or extend the time, (2) refrain from exercising any rights against the Company, or (3) apply any sums paid to any liability of the Company at Vendors discretion.

As to any and all guarantors undersigned, this guaranty shall continue, notwithstanding the dissolution, termination, or change in ownership or personnel of any one or more of the undersigned, Company or Vendor.

Signature of Personal Guarantor #2*	Print Name of Signer*	Date
Signature of Personal Guarantor #1*	Print Name of Signer*	Date

* Do not accept this application if the signature or printed name above is followed by a title or office, e.g. "President".