

# Attention Tex-Star Equipment Sales Department!!

Attention: \_\_\_\_\_ Fax # 214-742-5218

Your Name: \_\_\_\_\_

Your phone number: \_\_\_\_\_

Your fax number: \_\_\_\_\_

Best time to call you back: \_\_\_\_\_

Unit(s) you are interested in: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# TEX-STAR EQUIPMENT SALES

11295 Tantor Road Dallas, TX 75229

PHONE 972-406-1553

FAX 214-742-5218

## LESSEE COMPANY INFORMATION

COMPANY NAME	PROPRIETORSHIP, CORP., PARTNERSHIP	FEDERAL TAX ID#		
PHYSICAL ADDRESS	CITY	COUNTY	STATE	ZIP CODE
CONTACT	TELEPHONE	YEARS IN BUSINESS		

## PERSONAL INFORMATION ON GUARANTORS

NAME	TITLE	CITIZENSHIP	SOCIAL SECURITY #	DATE OF BIRTH
HOME ADDRESS	CITY	STATE	ZIP CODE	
HOME TELEPHONE #	OWN OR RENT PRESENT HOME?	HOW LONG AT THIS ADDRESS?		

NAME	TITLE	CITIZENSHIP	SOCIAL SECURITY #	DATE OF BIRTH
HOME ADDRESS	CITY	STATE	ZIP CODE	
HOME TELEPHONE #	OWN OR RENT PRESENT HOME?	IS ANY BUSINESS CONDUCTED OUTSIDE OF US?		

## COMPANY BANK REFERENCES

NAME OF BANK BRANCH	ACCOUNT #	TELEPHONE	CONTACT
---------------------	-----------	-----------	---------

## TRADE REFERENCES

INSURANCE AGENCY	TELEPHONE	CONTACT
HAULING REFERENCE	TELEPHONE	CONTACT
HAULING REFERENCE	TELEPHONE	CONTACT

## FLEET INFORMATION

1. # of Trucks in Fleet \_\_\_\_\_ 2. Replacement or Additional Unit \_\_\_\_\_  
Truck Finance Reference \_\_\_\_\_ Telephone \_\_\_\_\_ Contact \_\_\_\_\_  
If you intend to apply for joint credit or as a Guarantor PG1 \_\_\_\_\_ PG2 \_\_\_\_\_

initial here:

The undersigned certifies that he/she has full authority to act on behalf of the applicant and that all of the information contained in this application and on each document required to be submitted are true and complete. I hereby affirm my identity as the individual named in this application and authorized Signal Finance (SFG) and its assigns to obtain my credit profile from the national credit bureau(s) for the purpose of considering this credit application and any subsequent update, renewal, collection or additional credit. A Photostat or facsimile of this authorization shall be as valid as the original. Further, I hereby authorize the bank & trade references listed above to release the information needed to assist (SFG) or its assigns. If your application for business credit is denied, you have the right to a written statement of the specific reason for denial. To obtain the statement, write to Signal Finance at 11525 Bohemian Forest Ave., Las Vegas, NV 89138. within 60 days from the date you are notified of our decision. We will send you a written statement of the reasons for denial. The FECO Act prohibits creditors from discriminating on the basis of race, color, religion, national origin, sex, marital status, or age (provided the applicant has the capacity to enter into a binding contract); or because all or part of the applicant's income derives from any public assistance program or any right under the Consumer Credit Protection Act. The Agency to contact concerning this creditor is Office or Thrift, 10 Exchange Place, Jersey City, NJ 07302. NOTICE: If you intend to act as a guarantor for the credit of one or more applicants and are providing information to (SFG) or its assigns for that purpose, please note that if (SFG) or its assigns determines that you do not meet its standards of credit for the amount and kind of credit desired by the primary applicant(s), (SFG) or its assigns is required to provide specific reasons for such adverse action to the primary applicant(s) and not to you. Unless you are willing to share the specific reasons for such adverse action based upon your credit history with the primary applicant(s) you should not submit this Principal/Guarantor information or a Personal Financial Statement to (SFG) or its assigns.

Signature \_\_\_\_\_

Date \_\_\_\_\_