

3352 N US Hwy 377
 Stephenville, TX 76401
 www.DiamondRTrailers.com



Application for
 Financing

Office (254) 968-6661
 Fax (254) 968-6668

Randi@DiamondRTrailers.com

DEALER DIAMOND R TRAILERS, LLC	CONTACT	PHONE
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APPLICANT INFORMATION				CO-APPLICANT INFORMATION							
ACKNOWLEDGMENT BY CO-APPLICANT: By providing Co-Applicant information, you confirm your intent to apply for joint credit and be jointly liable for the debt.											
FIRST NAME		MIDDLE		LAST		FIRST NAME		MIDDLE		LAST	
SOCIAL SECURITY NUMBER	BIRTH DATE	US CITIZEN? YES <input type="checkbox"/> NO <input type="checkbox"/>	MARRIED UNMARRIED SEPARATED	SOCIAL SECURITY NUMBER	BIRTH DATE	US CITIZEN? YES <input type="checkbox"/> NO <input type="checkbox"/>	MARRIED UNMARRIED SEPARATED				
CURRENT PHYSICAL STREET ADDRESS (NO P.O. BOX)			OWN RENT OTHER	CURRENT PHYSICAL STREET ADDRESS (NO P.O. BOX)			OWN RENT OTHER				
CITY	STATE	ZIP	HOW LONG?	CITY	STATE	ZIP	HOW LONG?				
MAILING ADDRESS (P.O. BOX)			CITY	STATE	ZIP	MAILING ADDRESS (P.O. BOX)			CITY	STATE	ZIP
MORTGAGE or LANDLORD NAME			MONTHLY PAYMENT	MORTGAGE or LANDLORD NAME			MONTHLY PAYMENT				
HOME PHONE (Include Area Code)	CELL PHONE (Include Area Code)	OTHER PHONE		HOME PHONE (Include Area Code)	CELL PHONE (Include Area Code)	OTHER PHONE					
PREVIOUS ADDRESS if current is less than 2 years (Street, City, State & Zip Code)			HOW LONG?	PREVIOUS ADDRESS if current is less than 2 years (Street, City, State & Zip Code)			HOW LONG?				
OCCUPATION			YEARS IN FIELD	OCCUPATION			YEARS IN FIELD				
EMPLOYER			YEARS	EMPLOYER			YEARS				
BUSINESS PHONE (Include Area Code)	Extension #	GROSS MO. INCOME		BUSINESS PHONE (Include Area Code)	Extension #	GROSS MO. INCOME					
SOURCE OF OTHER INCOME (ALIMONY, CHILD SUPPORT ETC.)*			MONTHLY AMOUNT	SOURCE OF OTHER INCOME (ALIMONY, CHILD SUPPORT ETC.)*			MONTHLY AMOUNT				
PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS AT PRESENT)			YEARS	PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS AT PRESENT)			YEARS				
*SOURCE OF OTHER INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION				*SOURCE OF OTHER INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION							
DRIVER'S LICENSE NUMBER			EXPIRATION DATE	DRIVER'S LICENSE NUMBER			EXPIRATION DATE				

I/We certify that the information given is true, correct and complete and is given for the purpose of obtaining credit, and CERTIFIED CAPITAL INC-TRAILER FINANCE and any other creditor or prospective creditor of the undersigned or any agency employed by you or any of them are authorized to make investigations, including credit inquiries and employment verifications concerning the undersigned or concerning the above information and to disclose to each other the information set forth above and the results of such investigations. ANY FAX TRANSMISSION OF MY SIGNATURE WILL BE HELD EQUALLY ENFORCEABLE AS MY GENUINE SIGNATURE.

APPLICANT'S SIGNATURE _____ I intend to apply jointly (please initial) _____ DATE _____

CO-APPLICANT'S SIGNATURE _____ I intend to apply jointly (please initial) _____ DATE _____

FOR DEALER USE ONLY					PRICING:	
Unit Info: Model Year Make Model					Total Sell Price _____	
					+Tax _____	
					+Fees _____	
					-Trade-in Allowance** _____	
					+Trade-in Payoff** _____	
					-Cash Down _____	
Trade-In				Pay off Bank:	=Amount Financed _____	