

MOTOR TRUCK EQUIPMENT COMPANY



Store Use Only	Approved By _____
	Date _____
	Cr Limit _____
Home Office Use	

APPLICATION FOR ACCOUNT

Date of Application _____

Type of account for which you are applying:

- Charge account Check/Cash account (allows you to pay with a check at time of purchase)

Business Name _____ **Principal owner** _____

Mailing Address _____

City, State, Zip _____

Physical Address (if different) _____

Phone _____

Fax _____

Cell _____

Email address _____

Type of organization Corporation Partnership Sole-Proprietorship Other _____

Type of business _____ **# of units in your fleet** _____

BANK ACCOUNT INFORMATION

Name of Bank _____ **Bank Account #** _____

Address _____

City, State & Zip _____

Phone # _____



Your application will NOT be processed if you leave these blank:

Do you require a purchase order number for each invoice? Yes [___] No [___]

Are you Tax Exempt? _____ If YES, a signed Tax Exempt form **MUST** be included with your application.

We (I) have read and agree to be bound by the MOTOR TRUCK EQUIPMENT COMPANY credit agreement as follows: We (I) understand that payment terms are Net 10th EOM. All invoices are to be paid upon receipt of a Statement. Any invoice which remains unpaid will be considered past due and is subject to an interest charge of 1-1/2% per month or 18% per year. We (I) agree to pay finance charges applied to our (my) account. We (I) will be responsible for any and all collection/court costs and fees, if necessary.

In consideration for the granting of credit, we (I) submit the above information which you may rely on as being accurate. We (I) further authorize any of our (my) creditors, including our (my) Bank References, to release information to you regarding our (my) financial status.



Signature/Title _____
Owner, officer, general partner or authorized person

Spouse Signature _____
for Owner/Operators



PRINT your name _____

PRINT your name _____

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If you are applying for a CHARGE account, list four (4) Trade Credit references (examples: vendors from whom you purchase Parts, Service, Fuel, Tires etc. Do not include banks or credit card companies). These references are not required if you are only applying for a Check/Cash account.

1. Name _____ Address _____ City, State & Zip _____ Phone number _____ Fax number _____ Account # _____	3. Name _____ Address _____ City, State & Zip _____ Phone number _____ Fax number _____ Account # _____
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2. Name _____ Address _____ City, State & Zip _____ Phone number _____ Fax number _____ Account # _____	4. Name _____ Address _____ City, State & Zip _____ Phone number _____ Fax number _____ Account # _____
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OWNER-OPERATORS MUST INCLUDE THE FOLLOWING:

Social Security # _____
Spouse's name _____

Note: Your spouse's signature is required on the reverse side of this form.

Employer _____

Employer's address _____

How long? _____ Monthly income _____

Is your truck financed? No Yes If yes, with whom? _____

To submit your completed application: Mail, FAX or hand deliver to your nearest Kenworth of PA location

- | | |
|---|----------------------|
| <input type="checkbox"/> PO Box 1922, 198 Kost Road, Carlisle PA 17013 | ▪ Fax # 717-766-3596 |
| <input type="checkbox"/> 109 Keystone Industrial Park, Dunmore PA 18512 | ▪ Fax # 570-963-9133 |
| <input type="checkbox"/> 530 N. Center Ave., New Stanton PA 15672 | ▪ Fax # 724-925-5044 |
| <input type="checkbox"/> 4054 State Route 308, Clintonville PA 16372 | ▪ Fax # 814-385-1059 |
| <input type="checkbox"/> 16 Motel Drive, Shartlesville PA 19554 | ▪ Fax # 610-488-8117 |

A NOTE ABOUT OUR ACCOUNT APPLICATION PROCESS

We value our customers business. We strive to approve or deny all applications promptly. We will be making credit inquiries to your listed Bank and Trade References. We will approve or deny your Application based on information they provide to us. If your account is approved, you will receive your new account number and be advised of your credit limit. If your request for account is denied, you will be told why. If you have not heard from us, in writing, within 30 days of submitting this application, please contact our Credit Department at 717-766-8000, ext 2219.

