



Trailers Canada Corp.
 416 S. Academy Street
 Stoughton, WI 53589

Credit Application

Full Legal Name _____ Tax Identification Number _____

Street Address _____ City _____ Province _____ Postal Code _____

Mailing Address _____ City _____ Province _____ Postal Code _____
 (Complete only if applicable)

Phone Number: _____ Fax Number: _____

Year Company Established: _____ PST Exempt: Yes No

Ownership:		
Name of Owner	Title	Ownership Percentage

Current Equipment Information:	
Total Trailers (owned and leased)	
Total Tractors (owned and leased)	
Total Owner-Operators	

Credit Request:	
Total Trailers	
Requested Term (in months)	

Is the equipment to be leased an addition or a replacement to your current fleet? _____

Major Customers: <i>(Please list all customers that comprise more than 20% of your annual sales.)</i>		
Customer Name	Length of Relationship	% of Annual Revenues

Equipment Financing and Leasing References:			
Finance Co. Name	Contact	Phone Number	Account Number

AUTHORIZATION TO RELEASE CREDIT INFORMATION

The undersigned hereby authorizes Stoughton Trailers Acceptance to make inquiry into, to request, and to receive any information concerning my general reputation, and all information from creditors which Stoughton Trailers Acceptance deems relevant for the potential granting of the proposed borrowing. This authorization shall be effective from the date upon which this agreement is signed and is extinguished automatically upon full payment of the present borrowing, if granted.

By _____ Title _____ Date _____

Please attach year-end financial statements for the past two years and current interim financial statement. Year-end financial statements should include balance sheet, profit and loss statement, statement of cash flows and related accountant notes. If available, please provide financial projections for the forthcoming fiscal year.

