

COMMERCIAL LEASE/EFA APPLICATION(TRUCKING)									
Consultant: Phor	hone Number:			Email:					
Business Information									
Business Name: Anderson, Brown and Le									
Business Address: Some Random Street Name 3/5									
City: South Dakota	State:	: South Dakota		Zip Cod	de: asdf				
Date Established: 03-03-2025			Tax ID: 1288188199						
Email Address: mora@example.net				Phone Number: 213-875-1856					
Personal Information									
First Name: Jennifer	Mora								
Date of Birth: 03-05-2025	Ownership %:								
Social Security Number: 945-21-5205 Mobile Phone Number: 213-875-1856									
Home Address: Some Random Street Name 3/5									
City: West Kathryn	State:	: New Hampshire		Zip Code: 88888					
Rent or Own	Years at Current Address:								
Email Address:									
Co-Applicant									
First Name:									
Date of Birth:				Ownership %:					
Social Security Number: Mobile Phone Number: 213-875-1856									
Home Address:									
City:	State:	:	Zip Code:						
Rent or Own		Years at Current Ad	dress:						
Email Address:									
Haul Reference/Employment Background									
Current Employer/Haul Source Information									
Company Name:		Phone Number:			How Long:				
Address:	Goods Hauled:								
Will You Be Driving This Equipment? Yes□ No□ *If Yes, # of Years CDL Experience # Years as driver  # of years as Owner/Operator *If No, Complete Drivers Information Below									
Applicant Drivers License Number:	Issue State: Expiration:								
Driver Name, Full Address:									
Years of Experience:	Driver's License Number:								

Issue State:			Expiration:					
Email Address:								
Credit References								
Creditor Name & Address:								
Phone Number:			Account Number:					
Collateral:			Balance Owed:					
Creditor Name & Address:								
Phone Number:			Account Number:					
Collateral:			Balance Owed:					
List All Trucks and Trailers (owned or leased)								
Year:	Make and Model:							
Company Hauling For:			Where Financed:					
Year:	Make and Model:							
Company Hauling For:			Where Financed:					
Year:	ar: Make and Model:							
Company Hauling For:			Where Financed:					
Year:	Make and Model:							
Company Hauling For:			Where Financed:					
Year:	Make and Model:							
Company Hauling For: Where Financed:								
Certification/Disclosure Authorization  I certify that all above information is true and correct and hereby authorize all of my credit and haul/employment references to release any information requested. I hereby authorize Quality Leasing Co., Inc. and/or its assignees to verify any and all credit information, including, however not limited to banks, trades and credit reports.								
X			r Mora	03-14-2025				
(Applicant Signature)		(Print Name)		Date				
X(Co-Applicant Signature)	(P	(Print Name)		Date				