



Application for Credit With:



Hoover Truck Centers, Inc.
T/A Transport Truck & Equipment Co., Inc.
Robert H. Hoover & Sons, Inc.
 Locations:

PO Box 719		
Goldmine Road	1784 Route 9	1504 Mainline Drive
Flanders, NJ 07836	Toms River, NJ 08753	Cinnaminson, NJ 08077
Phone: 973-347-4210	Phone: 732-347-2128	Phone: 856-773-4600
Fax: 973-347-0170	Fax: 732-341-8854	Fax: 856-773-4610

Remit to Address: PO Box 719, Flanders NJ 07836

TERMS: Net 30 / 1.5% Finance Charge on ALL Past Due Balances.

Please be sure to review your application for completeness.

Return Via Fax to 973-347-0170

Mail to PO Box 719, Flanders NJ 07836

Email: erinm@hoovertruckcenters.com

Please provide the following documents with this application:

- A.) Complete Sales Tax Form
- B.) Business Card

The following information **MUST** be provided in **FULL**. It will be held in the strictest of confidence.

Name of Company/Individual(s)

Mailing Address

City State/Zip County

Physical Address

City State/Zip

Years at this Address Type of Business

Accounting Phone # Accounting Email Address

Shop Phone Number Fax Number NJ Tax ID#/Social Security #

The Company/Individual(s) listed above hereby applies for credit in accordance with the terms Set forth in this four page application for credit.

Ownership Information:

Corporation Partnership LLC Individual

Name of Principal

Name of Principal

Personal Address

Personal Address

City State Zip

City State Zip

Phone Number

Phone Number

Credit References:

Bank Reference:

Bank Name

Bank Phone # Bank Fax #

Account Number

Contact Person

Trade References:

1.) _____
Name

Address

Phone # Fax#

City State Zip

2.) _____
Name

Address

Phone # Fax#

City State Zip

3.) _____
Name

Address

Phone # Fax#

City State Zip

Are Purchase Orders Required? Yes No

Name of those authorized to purchase?

I/We certify that all the information on this form is correct. I/we fully understand your credit terms as stated on page 1 of this credit application and agree to proper payment in consideration of extended credit.

Signature of Owner/Officer: _____

Date: _____

Please Print Name: _____

It is agreed that this is an application for an open account for the purchase of heavy duty vehicle parts and service.

All invoices are due and payable 30 days after invoice date.

Statement closing date is the 25th of every month.

Finance Charge: 1.5% per month on all invoices not paid within 30 days of invoice date.

Open account privileges may be withdrawn when any unpaid account becomes past due.

A.) Upon delinquency, all purchases may be automatically placed on C.O.D. status and a finance charge will be paid on late balance.

B.) If the account is placed in the hands of an attorney for collection through suit, probate or bankruptcy proceedings, there will be paid, in addition to all other charges, attorney's fees for such services.

C.) Any unapplied payments and/or credits not taken within one year, will be written off all accounts. **NO CHECKS WILL BE ISSUED.**

Signature of Owner/Officer: _____ Title: _____

Name of Corporation: _____ Date: _____

I/We jointly or personally, absolutely and unconditionally guaranty prompt, primary and immediate payment of sums of credit advances.

Signature: _____ Signature: _____

Print Name: _____ Print Name: _____

Title: _____ Title: _____

Date: _____ Date: _____

Date

Name of Bank/Creditor

This letter authorizes Hoover Truck Centers to obtain information about our/my account # _____. This information will be used for the purpose of establishing a line of credit our/my company at Hoover Truck Centers.

Thank You,

Signature

Print Name of Individual

Name of Company