



FORD CREDIT

BUSINESS CREDIT APPLICATION

DEALER LOCATION CONTACT PHONE FAX

FC-7144

Legal Name: Date of Birth (for Individuals): DBA:

Proprietorship Corp. Sub S LLC Partnership Other: Tax Exempt Number:

State-issued Organization # (not tax id #): State of Organization or state of legal residence for individuals:

SOC SEC # / TAX ID # Gross Profit (Monthly Income) Type of Business Yrs in Business E-Mail and Website Address

Owner/Guarantor: Name Title Address PH# Social Security / TN # Date of Birth Ownership %

Note: Sole Proprietor, Individual Co-Applicant(s) or Individual Guarantor(s) must complete this section

Individual (First Name, Middle Name, Last Name, Suffix): Social Security Number Date of Birth

Please use additional applications if more space is needed for multiple owner, guarantor or applicant information.

Have you previously done business with Ford Credit (check one Yes No) If yes, Acct #: List other creditors you do business with:

IMPORTANT INFORMATION ABOUT ESTABLISHING A RELATIONSHIP WITH FORD CREDIT

For the purpose of securing credit from Ford Motor Credit Company ("Ford Credit"), each of the parties signing below (the "Undersigned") certifies that the above information is true and complete.

Applicant Signature Title Date I intend to apply for joint credit Applicant Initial Here

If corporate guarantor, authorized officer must sign and show corporate title. If partnership guarantor, a general partner must sign and show "Partner" as Title.