



# Charter Finance, Inc.

1867 S Hwy 14, Greer, SC 29650 Phone 864-801-4151 Fax 864-801-4152

## BUSINESS INFORMATION:

LEGAL BUSINESS NAME: \_\_\_\_\_ TAX ID # \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE OF INCORPERATION: \_\_\_\_\_ STATE OF INCOPERATION: \_\_\_\_\_ REGISTERED AGENT \_\_\_\_\_

USDOT # \_\_\_\_\_ CHECK ONE: ( ) Corporation ( ) Partnership ( ) Sole Proprietorship

## APPLICANT PERSONAL INFORMATION:

NAME: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

DOB: \_\_\_\_\_ SS #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE ISSUED: \_\_\_\_\_

ARE YOU KNOWN BY ANY OTHER NAMES? \_\_\_\_\_

EMERGANCY CONTACT: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ Ph# \_\_\_\_\_

## BANKING INFORMATION:

NAME OF BANK: \_\_\_\_\_ BRANCH: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

CONTACT: \_\_\_\_\_ TELEPHONE#: \_\_\_\_\_

ACCOUNT # \_\_\_\_\_ ABA # \_\_\_\_\_ CHECHING ( ) SAVINGS ( )

## PERSONAL REFERENCES:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TELEPHONE#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TELEPHONE#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TELEPHONE#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

## BUSINESS REFERENCES:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TELEPHONE#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TELEPHONE#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**WORK INFORMATION:**

HAVE YOU OR DO YOU CURRENTLY OR HAVE YOU IN THE PAST USED A FREIGHT BROKER? \_\_\_\_\_ IF SO :

NAME OF BROKER: \_\_\_\_\_ TELEPHONE#: \_\_\_\_\_ TIME USED: YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

PLEASE PROVIDE TYPES OF FREIGHT BEING HAULED:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

PLEASE PROVIDE MAIN HAULING ROUTE(S)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

WHEN THE EQUIPMENT IS NOT IN USE, IT WILL BE LOCATED AT:

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

OR

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## FEE DISCLOSURE STATEMENT.

To proceed with your commercial equipment loan application, you must first deposit funds for payment of the fees listed below via; credit card authorization form, ACH form, or Bank wire.

Application Fee: **\$150.00**. A fee for the initial processing of a loan application.

Credit Report Fee: **\$10.00**. A fee for a report detailing an individual's credit history and status of an individual's credit standing prepared by a credit bureau and used in determining a loan applicant's creditworthiness.

Collateral Appraisal Fee: **\$25.00** A fee for an FMV expressing an opinion as to the defined value of an adequately described property as of a specific date, that is supported by relevant market information.

Other: **\$15.00** Description: Administrative fee.

TOTAL REQUIRED DEPOSIT **\$200.00**. All fees associated with this credit application, are **non-refundable** and are due prior to the processing of this credit application. Should the actual costs exceed the estimate, you understand that you must pay the remaining balance at or prior to closing. Upon a successful loan closing, all fees paid at the time will be applied to the customer's account as principal balance reduction.

## APPROVAL PROCESS AND REQUIREMENTS.

### PLEASE PROVIDE THE FOLLOWING:

Completed Application

Three (3) full months of Personal bank statements

Three (3) full months of Business bank statements

A copy of the applicant's driver's license

Credit review and process will take up to 72 hours.

Upon credit approval, the customer will provide proof of insurance, which is equal to the collateral financed amount.

### PLEASE EMAIL ALL INFORMATION ABOVE TO:

[info@charterfinance.com](mailto:info@charterfinance.com)