



Credit Application

www.barrgo.com
 Finance@Barrgo.com
 P - (404) 380-1557
 F - (404) 860-1475

BUSINESS INFORMATION *Please fill out application completely*

Company Name: _____ Type of Bus _____

Business (Check One): Corp Partnership Proprietorship LLC

Physical Address: _____ City: _____ State: _____ Zip Code: _____ County: _____

Business Phone: _____ Fax Number: _____ US DOT / MC #: _____

Federal I.D. No.: _____ Gross Revenue: _____ Years as Driver: _____ Years as Owner / Operator: _____

Garaging Address: _____ City: _____ State: _____ Zip: _____ Current Fleet: _____
 Tractor# _____ Trailer# _____

Haul Reference: _____ Contact: _____ Phone: _____ E-mail: _____

OWNERSHIP INFORMATION *Include all owners to account for 100% of company ownership*

1. Owner / Primary Contact: _____ Title: _____ Ownership % _____ SSN: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Rent or Own? _____ Spouse: _____ Spouse SSN: _____

Home Phone: _____ Cell Phone: _____ Email Address: _____

2. Owner _____ Title: _____ Ownership % _____ SSN: _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Rent or Own? _____ Spouse: _____ Spouse SSN: _____

Home Phone: _____ Cell Phone: _____ Email Address: _____

COMMERCIAL LEASE OR LOAN REFERENCES

Lender: _____ Equipment: _____ Original Amount: _____ Balance: _____

Lender: _____ Equipment: _____ Original Amount: _____ Balance: _____

EQUIPMENT INFORMATION *Please include Yr., Make, & Model #.*

Please attach the equipment quote and/or picture if available

	YEAR	MAKE	MODEL
1	Qty: _____	Price: _____	Description: _____
2			

DEALER/ SUPPLIER: BARRGO LLC. **Contact Person:** Patrick or Blake **Telephone Number:** (404) 380-1557 **Fax Number:** (404) 860-1457

Each undersigned individual does hereby authorize the release of any and all credit information pertaining to the above credit application to Barrgo LLC and/or its assignees. Such authorization shall extend to obtaining credit information including personal credit bureau's as well as bank and trade references. A faxed copy of this form shall be valid as an original. **Please email application to finance@barrgo.com or fax to (404) 860-1475 upon Completion.**

Signature _____ Print _____ Date _____