ANCHOR™
ACCEPTANCE CORPORATION
Phone 605-232-3435 • Fax 605-232-3573 • Toll Free 1-800-513-1014
E-mail: finance@wilsontrailer.com • Web Site: www.wilsontrailer.com

APPLICATION FOR FINANCING

Date: _____ Branch: _____ Salesman: _____

Name of Applicant/Business: _____

Exact name to be shown on title: _____

Address	Phone #	Social Security#	Spouse	Birthdate

County _____ Fed ID# _____

E-Mail Address: _____

Years in Business: _____ Years at Address: _____ Acres Owned: _____

Number Trucks Owned _____ Number Trailers Owned: _____

Iowa Customers Only: Prorate _____Yes_____ No

Insurance Agent Name and Phone Number _____

BANK AND CREDIT REFERENCES

Name	City/State	Phone #	Contact	Account Number

Hauling Reference

Financial Information

Gross Farm Income: $ _____ Total Assets: $ _____

Non-Farm Income: $ _____ Total Liabilities: $ _____

DESCRIPTION & PRICE OF TRAILER(S) TO BE FINANCED _____ $ _____

CASH DOWN PAYMENT $ _____
GROSS ALLOWANCE ON TRADE(S) $ _____
& DESCRIPTION OF TRADE(S) _____
OWING (Payoff) $ _____ TO: _____
NET ALLOWANCE $ _____ _____
TOTAL DOWN PAYMENT ..... $ _____
BALANCE TO BE FINANCED ..... $ _____

TERM:_____ RATE: _____ % LIBOR PLUS: _____% VARIABLE _____ FIXED _____ $_____ DOCUMENTATION FEE

CUSTOMER NUMBER OF PREVIOUS ACCOUNT: _____
REMARKS:

Please read and sign

THE UNDERSIGNED CERTIFIES that the above information given for credit purposes is true and correct and authorizes the firm or person to whom this application is made, and any credit bureau agency to investigate the references, statements or other data listed or accompanying this application. The undersigned authorizes all parties contracted to release credit and financial information requested as a part of an investigation. (Photocopy of this application may be presented as evidences of authority also.)

Signature: _____ Date: _____

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