



**Transit Plus, Inc.
58 West 9th Street
Atlantic Beach, FL 32233**

Commercial Credit Application

**Please complete the attached form and fax it
back to Transit Plus, Inc. at: (904) 241-0016**

If you have any questions, contact us at:

**(904) 241-6004 – Outside of Florida
(800) 373-2143 – Within Florida**



Transit Plus, Inc.
 58 West 9th Street * Atlantic Beach, Florida 32233
 (904) 241-6004 * (800) 373-2143 * Fax (904) 241-0507
<http://www.TransitPlus.com>

CREDIT APPLICATION (Page 2 of 2)

SECTION E DEBT INFORMATION

() RENT: Name and Address of Landlord _____ Phone No. _____

() House () Apartment () Room () Furnished () Unfurnished Monthly Rental \$ _____

() OWNS: Mortgage Company and Address Date Purchased Purchase Price Mortgage Balance Monthly Payment

1. _____ \$ _____ \$ _____ \$ _____

2. _____ \$ _____ \$ _____ \$ _____

Co-Owner of Property: Name _____ Address _____

CREDIT (List open and recently paid accounts with banks, finance companies, credit union, department stores and credit cards) Circle Applicable Symbol (J - Joint Obligation; S - Sole Obligation; G - Guarantor)

Name of Creditor	Location	A/C No.	Purpose	Original Amount	Balance	Monthly Payment
J S G	_____	_____	_____	_____	_____	_____
J S G	_____	_____	_____	_____	_____	_____
J S G	_____	_____	_____	_____	_____	_____
J S G	_____	_____	_____	_____	_____	_____

If joint obligation with whom? _____

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. Transit Plus and/or its assigns and designees are authorized to check my credit, including consumer credit reports and employment history and from time to time may be asked to answer questions about your credit experience with me.

 Applicant's Signature Date Other Signature Date