

3245 U.S. HWY. 175E ATHENS, TX 75752

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PART 1- GENERAL APPLI	CANT INFORMATION			
First Name:	Middle:	Last:	Suffi	x:
Street Address:	wildle.	City:	State:	Zip:
elephone:	Fax:	Cell:	E-mail:	2ip
DL/Passport #:	State Issued In	Country (if non US Citizen):	L	Expires On:
Date of Birth:	otate issued iii	Country (ii non de ciazon).		
What is your type of residen	ce? Own Ren	nt ☐ Lease ☐ Board ☐ C	Other Years at add	dress:
PART 2 - GENERAL BUSIN			o iii o i o ai o ai a a	
egal Business Name:	,			
	Proprietorship Partnershi	p Corporation LLC	Government	Trust Non-Profit
SS#/Federal Tax ID:	Org ID:		Time in Business:	Years Months
Gross Annual Income \$	0.g.2.			
		quired, including three fiscal year-	end and interim financia	al statements:
Principal Use of Equipment:			-	Municipal Lease
Business Activity:	Farming Sand/Grav		Plumbing/So	<b>-</b>
[	Rental Construction	= 1	Landscapin	
[	Other/Describe:			g/Mowing
PART 3 - GENERAL MAILL	NG AND ADDRESS INFORMATION	(IF DIFFERENT THAN PART 1)		
	ng address if it is different than the	,		
Mailing Address:	ig address in it is amorem than the	, on our add, occ		
Dity:		State:	Zip:	
	ears, Please Indicate Your Previous			<del>_</del>
Street Address:	,			
Dity:	_	State:	Zip:	Yrs. At Address:
,	TE WHICH OF THE BELOW ITEMS	MAY APPLY TO YOU, CURRENTLY	<u>.                                      </u>	
	With Kubota Credit Corporation	Prior/Current Reposses	-	Tax Lien
Judgment	Filed Bankruptcy	Prior/Current Foreclosu		None of The Above
PART 5 - EMPLOYER INFO			<u>.</u>	
Please indicate if Retired	Self Employed	If Retired or Self Employed, please	indicate Gross monthly in	ncome \$
Current Employer Name:		Address:	,	· -
City:		State:	Zip:	Work Tel:
Current Position:		Gross Monthly Salary \$		Years on Job:
Previous Employer if at cu	ırrent Employer less than 2 years			
Previous Employer Name:		Address:		
City:		State:	Zip:	Work Tel:
Position:		Gross Monthly Salary \$		Years on Job:
	(Alimony, Child Support, or Separa	ate Maintenance Payments Need No	ot Be Disclosed Unless I	Relied Upon For Creditworthiness
Source of Other Income		Cross	Monthly Amount \$	-
Source of Other Income PART 7 - BUSINESS REFE	BENCES	Gloss	Monthly Amount \$	
PART 7 - BUSINESS REFE	Bank Information	Ea	uipment Financing/Leas	sing Potoronco
lama:	Bank information	Name:	juipilient Filiancing/Leas	sing Reference
Name: Nocount #:	Phone #:	Account #:		Phone #:
Contact:	1 Hone #.	Contact:		THORE #.
PART 8 - REFERENCES		Oornact.		
	Relative Not Living With You		Other Reference Info	ormation
lame	Relative Not Living With Tou	Name	Other Reference line	Simation
Address		Address		
City, State, Zip		City, State, Zip		
elephone Number		Telephone Number		
Relationship		Person To Contact		
		Acct Number	Mo I	Pmt. Amt:
Applicant's Signature		Acet Number	100.1	III. AIII.
applicant 3 Oignature				
Signature				Date:
lame		(Please Print)		_
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