

CREDIT APPLICATION - PLEASE PRINT CLEARLY

| | | | | | | | | | | | |
|---|---|---|--|--|---|---|--|---|---|------------------------|-----------------|
| APPLICANT | (1a) Proposed Borrower/Lessee is (check one) <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> S Corp <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government | | | | | | | | | | |
| | (2a) Name* (first, middle or initial, and last) | | | | | | (2b) DBA (if any) | | | | |
| | <i>*If you are an individual applicant: Use full name exactly as it appears on current and valid driver's license (including hyphens, spaces, and suffixes). If legal entity: Use full legal name of the entity registered with the Secretary of State.</i> | | | | | | | | | | |
| | (3a) Business Address (No P.O. Box or APO) | | | | (3b) City | | (3c) State | (3d) Zip | (3e) County | | |
| | (4a) Garage Address (No P.O. Box or APO) | | | | (4b) City | | (4c) State | (4d) Zip | (4e) County | | |
| | (5a) Cell Phone# | | | (5b) Work Phone# | | | (5c) Home Phone# | | | | |
| | (6a) Email Address | | | | (6b) Individual SS# or Entity Federal Tax ID # | | (6c) MC# | (6d) # Of Operators under MC# | | | |
| | (7a) Titling State | | (7b) Individual Applicant Date of Birth | | (7c) Entity State of Formation | | (7d) Entity Date of Formation | | (7e) Entity State Principally Managed or Directed from | | |
| | (8a) # of Vehicles Now Owned: | | Heavy Duty Trucks: | Med. Duty Trucks: | Trailers: | | (8b) Finance Request: <input type="checkbox"/> Additional Unit(s) <input type="checkbox"/> Replacement Unit(s) | | (8c) Would the Financed Vehicles be Rented or Subleased? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | (9a) HAZMAT <input type="checkbox"/> Yes <input type="checkbox"/> No | | (9b) First Time Buyer <input type="checkbox"/> Yes <input type="checkbox"/> No | | (9c) Owner-Operator Since (Date) | | (9d) Company Driver Since (Date) | | (9e) Commercial Driver's License Since (Date) | | |
| (10a) What do you haul? | | (10b) Prior Repo? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, what year?) | | (10c) Prior Bankruptcy <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, what year?) | | (10d) Any Outstanding Tax Liens or Judgments <input type="checkbox"/> Yes <input type="checkbox"/> No | | (10e) Previous Fiscal Year Gross Annual Revenue >\$5MM <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| OWNER(S) / ADDITIONAL APPLICANT(S) CO-BORROWER(S) AND/OR GUARANTOR(S) | (11a) <input type="checkbox"/> Owner <input type="checkbox"/> Co-Borrower <input type="checkbox"/> Guarantor (11b) This party is (check one) <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> S Corp <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government | | | | | | | | | | |
| | (12a) Name* | | | | | | (12b) Relationship to Applicant (include title: owner/co-owner/officer/partner/member/manager) | | | | |
| | <i>*If you are an individual applicant: Use full name exactly as it appears on current and valid driver's license (including hyphens, spaces, and suffixes). If legal entity: Use full legal name of the entity registered with the Secretary of State.</i> | | | | | | | | | | |
| | (13a) Address (No P.O. Box or APO) | | | | (13b) City | | (13c) State | (13d) Zip | (13e) County | | |
| | (14a) Cell Phone# | | | (14b) Work Phone# | | | (14c) Home Phone# | | | | |
| | (15a) Email Address | | | | (15b) Individual SS# or Entity Federal Tax ID # | | (15c) Individual Date of Birth | | | | |
| | (16a) <input type="checkbox"/> Owner <input type="checkbox"/> Co-Borrower <input type="checkbox"/> Guarantor (16b) This party is (check one) <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> S Corp <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government | | | | | | | | | | |
| | (17a) Name* | | | | | | (17b) Relationship to Applicant (include title: owner/co-owner/officer/partner/member/manager) | | | | |
| | <i>*If you are an individual applicant: Use full name exactly as it appears on current and valid driver's license (including hyphens, spaces, and suffixes). If legal entity: Use full legal name of the entity registered with the Secretary of State.</i> | | | | | | | | | | |
| | (18a) Address (No P.O. Box or APO) | | | | (18b) City | | (18c) State | (18d) Zip | (18e) County | | |
| (19a) Cell Phone# | | | (19b) Work Phone# | | | (19c) Home Phone# | | | | | |
| (20a) Email Address | | | | (20b) Individual SS# or Entity Federal Tax ID # | | (20c) Individual Date of Birth | | | | | |
| HAUL SOURCES | <i>Haul/Business references should not include yourself or your business</i> | | | | | | | | | | |
| | (21a) Business Name | | (21b) Material Hauled | | (21c) Start Date | | (21d) Contact Name | | (21e) Phone | (21f) Gross Mo. Income | (21g) Miles/Yr. |
| | | | | | | | | | | | |
| FINANCIAL HISTORY | <i>Current or previous financing of trucks, tractors, and trailers only</i> | | | | | | | | | | |
| | (22a) Lender Name | | (22b) Account# | | (22c) Contact Name | | (22d) Phone | | (22e) City | (22f) State | (22g) Zip |
| | | | | | | | | | | | |

REPRESENTATIONS: By signing below, I represent and agree that (i) I am signing individually (if I am an Applicant indicated above), (ii) either I or another signer below is authorized and is signing on behalf of each entity that is an Applicant indicated above, (iii) the information is provided for the purpose of obtaining business credit, and (iv) the information contained in this Credit Application is true, correct, and complete, (v) neither the Applicant nor any of Applicant's direct or indirect owners are subject to any prohibitions under any regulation or orders of the U.S. Dept. Of Treasury's Office of Foreign Assets Control, and (vi) each signer below received and reviewed the Privacy Policy online at <https://www.navistar.com/privacy-policy>.

The following authorizations (i) apply to this Credit Application and subsequently for purposes of extending, reviewing, updating, and collecting credit; and (ii) are granted to the dealer receiving this Credit Application ("Dealer"), Navistar Financial Corporation ("NFC") and any financial institution or other potential creditor to which this application is referred ("Financing Source"). A copy of these authorizations shall be valid as the original.

AUTHORIZATIONS: By signing below, I (individually and on behalf of any entity, as the case may be) hereby authorize: (i) Dealer, NFC and each Financing Source to refer this Credit Application to, and share any credit information with, any other Financing Source and each of their respective affiliates, subsidiaries and service providers; and (ii) Dealer, NFC or any Financing Source to request and obtain, and any credit reporting agencies, Applicant's banks or other third parties to provide, consumer reports, background checks and credit and other information regarding any Applicant or me individually both now and in the future.

ECOA NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the Applicant has the capacity to enter into a binding contract), because all or part of the Applicant's income derives from any public assistance, or because the Applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006. If your application for business credit is denied or conditionally approved, you have the right to a written statement of the specific reasons for the denial or the conditional approval. To obtain the statement, please contact NAVISTAR FINANCIAL CORPORATION FINANCIAL SERVICE CENTER at 2701 International Drive, Lisle, IL, 60532 or by calling (800) 233-9121 within 60 days from the date you are notified of such denial or condition. We will send you a written statement of the reasons for denial within 30 days of receiving your request for the statement.

| | | |
|------------------------------|---|---|
| Print Applicant Name: | Print Guarantor #1 or Co-Borrower #1 Name: | Print Guarantor #2 or Co-Borrower #2 Name: |
| | | |
| Applicant Signature: | Guarantor #1 or Co-Borrower #1 Signature: | Guarantor #2 or Co-Borrower #2 Signature: |
| | | |
| Date Signed: | Date Signed: | Date Signed: |
| | | |