



Credit Application

Continental First Federal, Inc.

For FedEx Home Delivery & Ground Contractors website: www.continentalfirstfederal.com

YOUR PERSONAL INFORMATION

Print Name First Middle Last Social Security Number (SSN): Date Of Birth

Address City State Zip

Home Phone # Cell Phone # Fax Number Email Address

Residence: Rent ___ Lease ___ Own ___ For how Long: ___ (Yrs.) ___ (Mo.) Name of Landlord or Mortgage Co.:

COSIGNERS: Check here if you are applying as a co-signer ___ Who are you co-signing for? _____

YOUR BUSINESS INFORMATION

Are you an existing FedEx Contractor? ___ Yes ___ No For how long? ___ Years ___ Months

FedEx Terminal Contact Name FedEx Contact Phone Number FedEx Terminal Unit Number

Business type that is planning to operate this vehicle: Proprietor (Your Name) ___ Corporation ___ Partnership ___

Trade Name/ DBA: _____ Federal Tax ID # (if applicable): _____

EMPLOYMENT HISTORY (Last Two Employers)

Employer (1)	How Long? Years	Months	Position	Approx. income per year
Employer (2)	How Long? Years	Months	Position	Approx. income per year

BANKING REFERENCES (IF CURRENT BANK ACCOUNT IS LESS THAN 2 YEARS OLD PLEASE PROVIDE PRIOR BANK INFORMATION)

Bank: _____ Type of account : Personal Checking, ___ Business Checking ___

VEHICLE INFORMATION

New ___ Used ___ Year ___ P-500 Freightliner ___ Workhorse ___ P-700 ___ P-1000 ___ P-1200 ___
Ford E-250 ___ Ford E-350 ___ 'Straight' Truck ___ Other ___ (Make) _____ (Model) _____

I hereby certify that the information in this credit application is correct. The information included in this credit application is for use by Continental First Federal, Inc. in determining the amount and conditions of credit to be extended. I understand that Continental First Federal, Inc. and/or its assigns may also utilize other sources of credit information which it considers necessary in granting credit. Further, I hereby authorize the bank and references listed in this credit application to release the information necessary to assist Continental First Federal, Inc.

X _____
Signature Title Date

Health Plan information for contractors: ___ YES. I WOULD LIKE TO INFORMATION ON A NEW HEALTH PLAN !

Thank you for your application for business credit. We will process your application promptly. If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain the statement, please write to Continental First Federal, Inc. 13018 Lebanon Road Mt. Juliet, TN 37122. We will send you a written statement of the reasons for the denial within 30 days of receiving your request. 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 or age (provided the applicant has the capacity to enter into a binding contract or because all or part of the applicant's income derives from any public assistance program 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 Federal Trade Commission, Equal Credit Opportunity, Washington D.C. 20580.

Credit Application Rev. 7/07

Continental First Federal, Inc. 13018 Lebanon Road Mt. Juliet, Tennessee 37122

Toll free phone: 800-998-8997 Toll free FAX: 877-998-8997 Local Phone: 615-773-2266 Local FAX: 615-773-2268