

**LIBERTY TRUCK PARTS, INC.**  
**CREDIT APPLICATION/INTERNATIONAL HIGH VALUE APPLICATION**

**BUSINESS CONTACT INFORMATION**

|                          |        |  |  |
|--------------------------|--------|--|--|
| Individual name:         | Title: | Date business commenced                      |  |
| Company name:            |        | <input type="checkbox"/> Sole proprietorship |  |
| Phone   Fax:             |        | <input type="checkbox"/> Partnership         |  |
| E-mail:                  |        | <input type="checkbox"/> Corporation         |  |
| Primary company address: |        | <input type="checkbox"/> Other               |  |

**BUSINESS AND CREDIT INFORMATION**

|                              |  |                       |   |
|------------------------------|--|-----------------------|---|
| How long at current address? |  | Phone:                |   |
| Other business address:      |  | City, State ZIP Code: |   |
| Bank name:                   |  | Bank Phone:           |   |
| Bank contact name:           |  | Account number:       |   |
| E-mail:                      |  | Type of account:      | <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> Other |

**BUSINESS/TRADE REFERENCES**

|                       |  |         |  |
|-----------------------|--|---------|--|
| Company name:         |  | Phone:  |  |
| Address:              |  | Fax:    |  |
| City, State ZIP Code: |  | E-mail: |  |
| Type of account:      |  | Other:  |  |
| Company name:         |  | Phone:  |  |
| Address:              |  | Fax:    |  |
| City, State ZIP Code: |  | E-mail: |  |
| Type of account:      |  | Other:  |  |

**SHIPPING INFORMATION**

|                       |  |         |  |
|-----------------------|--|---------|--|
| Recipient's name:     |  | Phone:  |  |
| Address:              |  | E-mail: |  |
| City, State ZIP Code: |  |         |  |
| Country:              |  |         |  |

**AGREEMENT**

1. Fill out all required information and upon validation and receipt of funds, Liberty Truck Parts, INC will process the requested order and ship.
2. Please ensure all required information is correct, as we will input this information into our systems to ensure it is accurate. Inaccurate shipping addresses, company address, and contact information may result in termination of this transaction.
3. By submitting this application, you authorize LIBERTY TRUCK PARTS, INC. to make inquiries into the banking and business/trade references that you have supplied.

**SIGNATURES**

|                |  |                |  |
|----------------|--|----------------|--|
| Signature      |  | Signature      |  |
| Name and Title |  | Name and Title |  |
| Date           |  | Date           |  |

LIBERTY TRUCK PARTS, INC

(866)-654-5827

[info@libertytruckandauto.com](mailto:info@libertytruckandauto.com)



Thank you for taking the time to complete this application.