Progress Rail
A Caterpillar Company

CREDIT APPLICATION

[x] New Customer [ ] Existing Customer

P. O. BOX 1037
ALBERTVILLE, AL 35950
800-476-8769

Email Completed Form to: AR@progressrail.com

APPLICANT LEGAL NAME * _____ DATE _____

PHYSICAL ADDRESS * _____
STREET CITY STATE ZIP PHONE

BILL TO ADDRESS * _____
STREET CITY STATE ZIP FAX

COMPANY WEB ADDRESS: _____

BUSINESS DESCRIPTION * _____

Choose one: Class 1 RR; Transit; Utility; Industry; RR Contractor; Shortline; Leasing; Recycling; Wheel Shop; Trackworks; SteelMill; Parts; Car Repair; Other

DATE OF OWNERSHIP/CONTROL _____ DUN & BRADSTREET # _____

ACCOUNTS PAYABLE CONTACT *
Name _____ EMAIL _____
Phone * _____ Fax * _____

ARE YOU EXEMPT (Y/N) * _____ IF YES, COMPLETE THE MULTIJURISDICTIONAL EXEMPTION CERTIFICATE, IF APPLICABLE, OR PROVIDE A VALID CERTIFICATE FOR ALL STATES INTO WHICH PROGRESS RAIL WILL BE SHIPPING GOODS. STATE SALES TAX EXEMPTION ID# _____

VAT # _____ (International Customers Only) GST # _____ (Canadian Customers Only) PST# _____ (Canadian Customers Only)

FEDERAL ID# (FEIN) * _____

BUSINESS INFORMATION

INCORPORATED IN THE STATE OF _____ ESTABLISHED DATE _____ (MO/YR) YRS UNDER SAME CONTROL _____

HAS THE BUSINESS EVER DECLARED BANKRUPTCY (Y/N) _____ IF YES, DATE FILED _____ (MO/YR)

EXECUTIVE OFFICER NAME * _____ FINANCIAL OFFICER NAME * _____

IS APPLICANT A SUBSIDIARY (Y/N) * _____ IF YES, COMPLETE PARENT INFORMATION BELOW FEIN * _____

PARENT LEGAL NAME * _____

PARENT ADDRESS * _____
STREET CITY STATE ZIP PHONE FAX

PARENT BUSINESS DESCRIPTION * _____

Choose one: Class 1 RR; Transit; Utility; Industry; RR Contractor; Shortline RR; Leasing; Recycling; Wheel Shop; Trackworks; SteelMill; Parts; Car Repair; Other

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APPLICANT LEGAL NAME * _____ DATE _____

BANK REFERENCE (Phone and Fax Numbers Required)

BANK NAME * _____ CONTACT _____

ADDRESS * _____

STREET CITY STATE ZIP PHONE

CHECKING ACCOUNT # * _____ FAX * _____

SAVINGS ACCOUNT # _____ LOAN TYPES _____

IF YOUR BANK REQUIRES WRITTEN AUTHORITY TO RELEASE INFORMATION, PLEASE FURNISH A LETTER OF AUTHORITY

TRADE REFERENCES (Phone and Fax Numbers Required)

	NAME	Email Address	Phone Number
1)	*		
2)	*		
3)	*		
4)	*		

FINANCIAL INFORMATION

IN ORDER TO ASSIST US IN PROPERLY EVALUATING YOUR APPLICATION, WE REQUIRE A REVIEW OF YOUR LATEST YEAR-END FINANCIAL STATEMENTS PLEASE ATTACH THE FOLLOWING:

1. BALANCE SHEET 2. INCOME OR PROFIT/LOSS STATEMENT 3. CASH FLOW STATEMENT

ALL FINANCIAL STATEMENTS ARE STRICTLY CONFIDENTIAL

Applicant agrees to remit within payment terms stated on the Progress Rail Services (PRSC) invoices. Applicant certifies that the information contained therein is accurate, and grants permission for the references listed to release business information regarding applicant to PRSC. Applicant further agrees to pay any and all reasonable fees and court costs (including attorney's fees) incurred in the collection of this account.

OFFICER'S NAME AND TITLE (PLEASE PRINT OR TYPE) _____ OFFICER'S SIGNATURE _____ DATE _____

PROGRESS RAIL SALES REP USE ONLY

SALESPERSON NAME Carlton Hardman REQUESTED CREDIT LIMIT _____ CURRENCY _____

ANTICIPATED SHIP DATE _____ PRS LOCATION: _____

TYPE OF PRODUCT OR SERVICE BEING PROVIDED _____