

Apply for a Kenworth PremierCare Plus or Select Card today!

Pre-Application Form

Complete this form to receive the credit application with detailed information.

First Name: _____ Last Name: _____

Title: _____

Company Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

Fax: _____

E-mail: _____

Number of trucks: _____

Do you require revolving credit? Yes No

Fax this form to 425-254-4880, Attn: Marketing Services

or

Mail it to:

Marketing Services

PACCAR Parts

750 Houser Way North

Renton, WA 98055