

APPLICATION STATEMENT (Please Print)

Seller's Use Only --- Offering # \_\_\_\_\_

CLASS CODE:  RETAIL  RCL  OTHER

CHECK ONE APPLICABLE BOX (PRIMARY APPLICANT AND JOINT APPLICANTS MUST COMPLETE SEPARATE FORMS):						If Joint Applicant, Relationship to Applicant:						
Primary Applicant: <input type="checkbox"/>		Joint Applicant: <input type="checkbox"/> Application is for joint credit with primary applicant or as a guarantor. <input type="checkbox"/> Primary applicant is relying on you for income for alimony, child support, or separate maintenance or on your income or assets as the basis for repayment of the credit requested.				<input type="checkbox"/> S - Married		<input type="checkbox"/> P - Parent		<input type="checkbox"/> O - Other		
Last Name		First Name		Middle Name				<input type="checkbox"/> Jr. <input type="checkbox"/> Sr.				
Date of Birth			Soc. Sec. No.			Driver's License No. and State						
Physical Address (Number, Street, Apartment)						City		State		Zip Code		
Billing Address (Number, Street, Apartment, P.O. Box)						City		State		Zip Code		
County		Phone in Applicant's Home? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		Phone Number Area Code ( )		1 <input type="checkbox"/> Own Home Outright	3 <input type="checkbox"/> Living with Relatives	5 <input type="checkbox"/> Own/Buying Mobile Home	Lived There <input type="checkbox"/> Yrs. <input type="checkbox"/> Mos.			
2 <input type="checkbox"/> Buying Home		4 <input type="checkbox"/> Leasing/Renting		Cell Phone Number Area Code ( )			Other Phone Number Area Code ( )		Email Address - Personal		Email Address - Business	
Name and Address of Landlord or Mortgage Holder				Phone Number of Landlord or Mortgage Holder Area Code ( )				Rent or Mtge. Pmt. \$				
Previous Address (Street, City, State and Zip Code) (If less than 2 years at present address)										Lived There <input type="checkbox"/> Yrs.		
Level Of Education (Age Under 27 Only)		1 <input type="checkbox"/> 4-Year College Grad.		2 <input type="checkbox"/> 2-Year College Grad.		3 <input type="checkbox"/> Special Training		4 <input type="checkbox"/> Some College		High School Grad.? 5 <input type="checkbox"/> Yes 6 <input type="checkbox"/> No		
Current Employer Name				Current Employer Address								
Applicant's Occupation (If military, state rank)			Work Phone Number Area Code ( )			Gross Monthly Salary \$ _____			Time on Job Yrs. Mos.			
*Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.				*Source of other income				Other Income \$ _____				
Previous Employer's Name (if less than 5 years at current employer)						City/State						
Name of Bank						1 <input type="checkbox"/> Checking & Savings		3 <input type="checkbox"/> Savings Only		2 <input type="checkbox"/> Checking Only 4 <input type="checkbox"/> No Account		
Have You Ever Had a Car of Other Merchandise Repossessed? <input type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, When? Month Year		Have You Ever Filed Bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes		If Yes, When? Month Year						
Creditor's Name and City/State			Date Opened	Monthly Pmt. Amount	Unpaid Balance	Creditor's Name and City/State			Date Opened	Monthly Pmt. Amount	Unpaid Balance	
(Current/Previous Cars Financed by or Leased Through)						(Other Credit)						
(1)						(3)						
(2)						(4)						
Name and Address of Applicant's Nearest Relatives/Friends Not in Household (1)						Phone No. Area Code ( )		Relationship				
(2)						Phone No. Area Code ( )		Relationship				
(3)						Phone No. Area Code ( )		Relationship				
(4)						Phone No. Area Code ( )		Relationship				
FOR SELECTION	<input type="checkbox"/> New	Vehicle Identification Number					(1) Cash Price/Cap Cost (Incl. tax, title, reg. fees)..... \$ _____ (1)					
	<input type="checkbox"/> Used	Year	Model	Make	Body Style (If used vehicle)	Mileage (If used vehicle)	(2) Down Payment/Cap Cost Reduction					
							Cash \$ _____ + Rebate \$ _____ = \$ _____ (A)					
							Trade: Allow. \$ _____ - Owed \$ _____ = \$ _____ (B)					
							Total of Line (2) (A+ B) _____ (2)					
						(3) Unpaid Balance/Acquisition Cost (1 - 2) _____ (3)						
						If RCL: MSRP \$ _____ / LEV \$ _____						
						(4) Payable in _____ Mo. instalments of.....\$ _____ (4)						
						Trade	Make	Model	Body Style	Dealer Name		

**For the purpose of securing credit from you, I certify that the above information is true and complete to the best of my knowledge. I further certify that I have attained the age of majority. I authorize you to check my credit and employment history and to provide and/or obtain information about credit experience with me.**

**By signing this application, I acknowledge I have read side A and side B of this form, including the state specific disclosures.**

**Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_**