



Credit Application

Signature FINANCING®

DEALER INFORMATION

PROGRAM TYPE: _____

DEALER NAME: _____ DEALER NUMBER _____

APPLICANT INFORMATION (MARRIED MAY APPLY AS AN INDIVIDUAL)

<i>APPLICANT (PRINCIPAL DRIVER OF VEHICLE)</i>					<i>JOINT APPLICANT RELATIONSHIP</i>				
FIRST	MI	LAST	<input type="checkbox"/> SR <input type="checkbox"/> JR		FIRST	MI	LAST	<input type="checkbox"/> SR <input type="checkbox"/> JR	
STREET ADDRESS			HOW LONG?		STREET ADDRESS			HOW LONG?	
CITY	STATE	ZIP	HOME PHONE		CITY	STATE	ZIP	HOME PHONE	
DATE OF BIRTH		AGE	SOCIAL SECURITY NUMBER		DATE OF BIRTH		AGE	SOCIAL SECURITY NUMBER	
<input type="checkbox"/> OWN/BUYING <input type="checkbox"/> RENT/LEASE	<input type="checkbox"/> LIVE W/RELATIVE <input type="checkbox"/> OTHER	MONTHLY PAYMENT \$			<input type="checkbox"/> OWN/BUYING <input type="checkbox"/> RENT/LEASE	<input type="checkbox"/> LIVE W/RELATIVE <input type="checkbox"/> OTHER	MONTHLY PAYMENT \$		
MORTGAGE CO OR LANDLORD			MORTGAGE AMOUNT \$		MORTGAGE CO OR LANDLORD			MORTGAGE AMOUNT \$	
BANK NAME		BRANCH	CHECKING ACCT#		BANK NAME		BRANCH	CHECKING ACCT#	
BANK NAME		BRANCH	SAVINGS ACCT#		BANK NAME		BRANCH	SAVINGS ACCT#	
EMPLOYER NAME			HOW LONG?		EMPLOYER NAME			HOW LONG?	
EMPLOYER ADDRESS					EMPLOYER ADDRESS				
POSITION/TITLE		WORK PHONE	GROSS ANNUAL SALARY		POSITION/TITLE		WORK PHONE	GROSS ANNUAL SALARY	
ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED TO BE REVALED, IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS DEBT			ANNUAL AMOUNT \$		ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED TO BE REVALED, IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS DEBT			ANNUAL AMOUNT \$	
PREVIOUS EMPLOYER OR SCHOOL			HOW LONG?		PREVIOUS EMPLOYER OR SCHOOL			HOW LONG?	
REFERENCES					REFERENCES				
AUTO CREDIT REFERENCE		TRADING? YES/NO	BALANCE \$		AUTO CREDIT REFERENCE		TRADING? YES/NO	BALANCE \$	
OTHER CREDIT REFERENCE			BALANCE \$		OTHER CREDIT REFERENCE			BALANCE \$	
NEAREST RELATIVE (NOT LIVING WITH YOU)			RELATIONSHIP		NEAREST RELATIVE (NOT LIVING WITH YOU)			RELATIONSHIP	
ADDRESS			PHONE		ADDRESS			PHONE	
FRIEND OR RELATIVE			RELATIONSHIP		FRIEND OR RELATIVE			RELATIONSHIP	
ADDRESS			PHONE		ADDRESS			PHONE	

_____ Date _____
Applicant's Signature

_____ Date _____
Co-Applicant's Signature