

**LOAN APPLICATION**



We intend to apply for joint credit \_\_\_\_\_, \_\_\_\_\_

<b>SUMMARY:</b>	<b>AMOUNT TO FINANCE</b> \$	<b>TERM</b>
<b>Dealer</b>	<b>Contact</b>	<b>Phone</b>

COLLATERAL

**COLLATERAL BEING FINANCED**

<b>SELLING PRICE</b> \$	<b>CASH DOWN / REBATE</b> \$	<b>TRADE NET</b> \$	<b>TRADE VALU</b> \$	<b>LESS OWING</b> \$	<b>TRADE DESCRIPTION</b>
<b>YEAR</b>	<b>MAKE</b>	<b>MODEL</b>	<input type="checkbox"/> Auto Trans <input type="checkbox"/> Pwr Windows <input type="checkbox"/> Pwr Locks <input type="checkbox"/> Pwr Seats <input type="checkbox"/> Pwr Sunroof	<input type="checkbox"/> Cruise <input type="checkbox"/> Tilt <input type="checkbox"/> Air <input type="checkbox"/> Trlr Towing <input type="checkbox"/> Trim _____	<input type="checkbox"/> 4x4/AWD <input type="checkbox"/> Alloy Wheels <input type="checkbox"/> CD <input type="checkbox"/> Anti-theft <input type="checkbox"/> Leather
<b>VIN</b> (needed)		<b>TYPE</b> N - U - D			
<b>MILEAGE</b> -required	<b>CYLINDERS</b> 4 - 6 - 8	<b>BODY</b> 2 DR - 4 DR - MCV			

**OTHER EQUIPMENT:**

APPLICANT

<b>Applicant's Full Name</b>		<b>Address</b>		<b>City, State, Zip</b>		<b>Time at address</b>
<b>Phone</b>	<b>Soc. Sec. No.</b>	<b>DOB/Age</b>	<b>Previous Address</b>		<b>Time at address</b>	
<b>Personal Reference</b>		<b>Address</b>		<b>Phone</b>	<b>Relationship</b>	
<b>Employer</b>		<b>Address</b>		<b>Time at present job</b>		<b>Position</b>
<b>Monthly Income</b>	<b>Supervisor</b>	<b>Phone</b>	<b>Previous Empl.</b>	<b>Address</b>	<b>How Long</b>	

INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE PAYMENTS NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION.

FINANCIAL

<b>Other Income</b>	<b>Source</b>	<b>Temporary</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Other Income</b>	<b>Source</b>	<b>Temporary</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Own Outright <input type="checkbox"/> Mortgage	<input type="checkbox"/> Rent <input type="checkbox"/> Family	<b>Monthly Payment</b> \$	<b>Landlord or Mortgage Holder</b>	<b>Balance</b> \$	<b>Orig. Amt Paid</b> \$
<b>BANKS WITH</b>		<b>Checking Account</b>		<b>Branch</b>	
		<b>Savings Account</b>		<b>Branch</b>	

LIST ALL PRESENT OR PAST CREDITORS: BANKS, CHARGE ACCOUNTS, CREDIT UNION, FINANCE COMPANY, ETC.

Name of Company	Address	Account Number or Name	Collateral	Original Amount	Payment	Balance

CO-APPLICANT

<b>Co-Applicant's Full Name</b>		<b>Address</b>		<b>City, State, Zip</b>		<input type="checkbox"/> Own <input type="checkbox"/> Family	<input type="checkbox"/> Rent <input type="checkbox"/> Other	<b>Time at address</b>
<b>Monthly payment</b> \$	<b>Soc. Sec. No.</b>	<b>DOB/Age</b>	<b>Previous Address</b>		<b>Time at address</b>			
<b>Home Phone</b>	<b>Employer</b>		<b>Address</b>		<b>Time at present job</b>	<b>Position</b>		
<b>Business Phone</b>	<b>Monthly Income</b>	<b>Supervisor</b>	<b>Previous Employer</b>		<b>Address</b>	<b>How Long</b>		

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your experience with me.

Insurance Agent \_\_\_\_\_

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_ Joint Signature \_\_\_\_\_