

CONSUMER CREDIT APPLICATION

DEALER NAME:	CONTACT PERSON:	PHONE NUMBER: 1-888-887-7560	FAX NUMBER: 1-888-887-7561
--------------	-----------------	---------------------------------	-------------------------------

APPLICANTS NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER	HOME PHONE NUMBER	# OF DEPEND
-----------------	---------------	------------------------	-------------------	-------------

CURRENT ADDRESS	CITY	STATE	ZIP	# OF YEARS	MONTHLY PAYMENT	OWN	RENT	LIVE WITH RELATIVE	OTHER
-----------------	------	-------	-----	------------	-----------------	-----	------	--------------------	-------

PREVIOUS ADDRESS	CITY	STATE	ZIP	# OF YEARS	NEAREST RELATIVE NAME & PHONE				
------------------	------	-------	-----	------------	-------------------------------	--	--	--	--

EMPLOYER NAME & ADDRESS	# OF YEARS	WORK PHONE NUMBER	SELF EMP	
			YES	NO

OCCUPATION	GROSS MONTHLY INCOME	OTHER INCOME	PREVIOUS EMPLOYER	OCCUPATION	# OF YEARS
------------	----------------------	--------------	-------------------	------------	------------

CO-APPLICANT'S NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER	HOME PHONE NUMBER	# OF DEPEND
---------------------	---------------	------------------------	-------------------	-------------

CURRENT ADDRESS	CITY	STATE	ZIP	# OF YEARS	MONTHLY PAYMENT	OWN	RENT	LIVE WITH RELATIVE	OTHER
-----------------	------	-------	-----	------------	-----------------	-----	------	--------------------	-------

PREVIOUS ADDRESS	# OF YEARS	NEAREST RELATIVE NAME & PHONE		
------------------	------------	-------------------------------	--	--

CO-APPLICANT'S EMPLOYER NAME AND ADDRESS	# OF YEARS	WORK PHONE NUMBER	SELF EMPL	
			YES	NO

OCCUPATION	GROSS MONTHLY INCOME	OTHER INCOME	PREVIOUS EMPLOYER	OCCUPATION	# OF YEARS
------------	----------------------	--------------	-------------------	------------	------------

ASSETS	REALESTATE	LIABILITIES MONTHLY	MORTGAGE	BALANCE OWED
\$		\$		\$
\$	CHECKING	\$	AUTO LOAN	\$
\$	SAVINGS	\$	AUTO LOAN	\$
\$	AUTOS	\$	PERSONAL LOANS	\$
\$	OTHER	\$	CREDIT CARD BALANCE	\$

PURCHASE INFORMATION	BOAT INFORMATION	MOTOR INFORMATION	TRAILER INFORMATION	TRADE DESCRIPTION
SALE PRICE: \$	NEW OR USED ?	NEW OR USED ?	NEW OR USED ?	YEAR
TRADE AMT: \$	YEAR	YEAR	YEAR	MAKE
SALES TAX \$	MAKE	MAKE	MAKE	MODEL
TRADE PAYOFF: \$	MODEL	MODEL	MODEL	MOTOR
CASH DOWN: \$				
FINANCE AMT: \$				TRAILER YES OR NO ?

I AUTHORIZE YOU TO OBTAIN INFORMATION FROM ANY SOURCE INCLUDING BUT NOT LIMITED TO ANY CREDIT REPORTING AGENCY, MY EMPLOYER OR ANY OTHER SOURCE YOU DEEM NECESSARY TO GRANT CREDIT.

X _____ DATE _____ X _____ DATE _____
 APPLICANT CO-APPLICANT