

# APPLICATION FOR CREDIT

Dealership _____		Phone ( ) _____		Contact _____		
<b>INSTRUCTIONS:</b> Fill out each section completely. All information given will be verified. Items left blank may significantly hurt your chances in obtaining credit.						
<b>INFORMATION REGARDING APPLICANT:</b>						
Name _____		Address _____		City State Zip _____		
How Many Years? Own <input type="checkbox"/> Rent <input type="checkbox"/> \$ _____	Monthly Rent or Mortgage \$ _____	Home Phone _____	Social Security No. _____	Date of Birth _____	No. of Dependents _____	
Previous Address _____				City State Zip _____	How long? Mos. Yrs. _____	
Email Address _____						
Landlord or Mortgage Holder _____		Address _____		Phone ( ) _____	Banking Officer _____	
Employer or Company _____		How long? Yrs. Mos. _____	If Self-Employed, Nature of Business _____			
Business Address _____		City State Zip _____		Business Phone ( ) _____	Position _____	
Gross Monthly Income \$ _____	Net Monthly Income \$ _____	Source of Other Income _____		Amount \$ _____	Net Total Monthly Income \$ _____	
Previous Employer _____		Address _____		Phone _____	How long? Mos. Yrs. _____	
If total length of all employment is less than 5 years list prior employer or occupation.						
Previous Employer _____		Address _____		How long? Mos. Yrs. _____		
<b>BANKING INFORMATION:</b>						
<b>B A N K</b>	SAVINGS	Name _____	Branch _____	Phone ( ) _____	Account No. _____	Balance \$ _____
	CHECKING	Name _____	Branch _____	Phone ( ) _____	Account No. _____	Balance \$ _____
<b>LIST 2 NEAREST RELATIVES AND ONE PERSONAL FRIEND.</b>						
Nearest Relative (not living with you) _____			Phone ( ) _____		Relationship _____	
Address _____			City State Zip _____			
Nearest Relative (not living with you) _____			Phone ( ) _____		Relationship _____	
Address _____			City State Zip _____			
Personal Friend (Name, Address, Phone Number) _____						
Have You Ever Filed Bankruptcy? <input type="checkbox"/> Yes-Date _____ <input type="checkbox"/> No		Have you ever had a Repossession? What? _____ When? _____				

All the information given on this application is true, correct and complete. We or our assignee is authorized to exchange credit information covering this application and any credit granted. As part of the credit investigation process, we or our assignee may request a consumer report or commercial credit report in connection with this application for credit or any update, renewal or extension thereof. Upon request, we or our assignee will tell you whether or not a consumer report or commercial credit report was obtained and the name and address of the consumer reporting agency. I agree that we or our assignee may retain this application whether or not credit is approved. For purposes of securing credit and preparing documents, the signers agree and warrant that the above statements are true and correct.

Automobile insurance is required for the full term of the Contract, at my expense, against the hazards of fire, theft and accidental physical damage (including collision). This insurance must protect our interests. The policies issued by the insurance company will describe the terms and conditions. **I MUST CHOOSE THE COMPANY THROUGH WHOM ANY INSURANCE IS OBTAINED.**

## FAIR CREDIT REPORTING ACT DISCLOSURE

**This application for credit will be submitted to Lease and Rental Management Corp. dba Auto Loan, or dba Auto Use, (whichever is applicable), Andover, MA for purchase or consideration as to whether it meets credit requirements.**

**I certify that the above information is complete and accurate. I authorize an investigation of my credit and employment history and the release of information about my credit experience.**

APPLICANT SIGNS \_\_\_\_\_

DATE \_\_\_\_\_