

# Credit Application

## Applicant Information

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_  
City State ZIP Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Photo ID Type: \_\_\_\_\_

ID No.: \_\_\_\_\_ ID Expire Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

ID Issue Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ ID Issue State: \_\_\_\_\_

## Property Information

Type of Residence:  Own  Rent Home Value: \$ \_\_\_\_\_

Mortgage/Rent Payment: \$ \_\_\_\_\_ Finance Amount Requested: \$ \_\_\_\_\_

## Employer Information

App. Employer: \_\_\_\_\_ App. Position: \_\_\_\_\_

App. Gross Annual Income: \$ \_\_\_\_\_ App. Emp. Phone #: \_\_\_\_\_

Time at Current Job: \_\_\_\_\_ Years \_\_\_\_\_ Months

## Co-Applicant Information

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Last First M.I.

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Photo ID Type: \_\_\_\_\_

By signing this application, you are certifying that this information is true and complete, you intend the seller and/or assignee to rely upon these promises in deciding whether to extend credit to you or not, you authorize a full investigation and release of your credit record and your employment history. You authorize us and/or the assignee to release information about credit information to contractor. You are aware that your credit might be checked by several entities and you will not hold any of those entities nor contractor nor their assignee responsible for any effect this may have on your credit.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Co - Applicant: \_\_\_\_\_ Date: \_\_\_\_\_