

CREDIT APPLICATION

This application must be completed in ink and all sections answered

APPLICANT PHONE _____	DATE _____	APPLICATION TAKEN BY _____
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PART 1 - APPLICANT INFORMATION

LAST NAME _____	FIRST NAME _____	MIDDLE NAME _____	DATE OF BIRTH _____	SOCIAL SECURITY NUMBER _____	DRIVERS LIC. NO. _____	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED
STATE _____						

PLEASE GIVE 3 PREVIOUS ADDRESSES AND EMPLOYERS

CURRENT ADDRESS _____	LANDLORD _____ PHONE _____	HOW LONG? _____	<input type="checkbox"/> RENT <input type="checkbox"/> OWN
FORMER ADDRESS _____	LANDLORD _____ PHONE _____	HOW LONG? _____	<input type="checkbox"/> RENT <input type="checkbox"/> OWN
FORMER ADDRESS _____	LANDLORD _____ PHONE _____	HOW LONG? _____	<input type="checkbox"/> RENT <input type="checkbox"/> OWN

NAME & ADDRESS OF CURRENT EMPLOYER _____	SUPERVISOR _____ PHONE _____ POSITION _____	DATES EMPLOYED _____ (MTH/YR) TO (MTH/YR)	GROSS SALARY _____ SELF-EMP. - ADJ. GROSS INCOME (MOST RECENT TAX FORMS)
NAME & ADDRESS OF CURRENT/FORMER EMPLOYER _____	SUPERVISOR _____ PHONE _____ POSITION _____	DATES EMPLOYED _____ (MTH/YR) TO (MTH/YR)	GROSS SALARY _____ SELF-EMP. - ADJ. GROSS INCOME (MOST RECENT TAX FORMS)
NAME & ADDRESS OF FORMER EMPLOYER _____	SUPERVISOR _____ PHONE _____ POSITION _____	DATES EMPLOYED _____ (MTH/YR) TO (MTH/YR)	NUMBER OF DEPENDENTS BY AGE 0-5 _____ 6-12 _____ 13-17 _____ 18+ _____ NUMBER LIVING WITH YOU _____

NEAREST RELATIVE NOT LIVING WITH YOU NAME _____	ADDRESS _____	PHONE _____	RELATIONSHIP _____
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PART 2 - INFORMATION ABOUT CO-APPLICANT NON-APPLICANT SPOUSE

LAST NAME _____	FIRST NAME _____	MIDDLE NAME _____	DATE OF BIRTH _____	SOCIAL SECURITY NUMBER _____	DRIVERS LIC. NO. _____	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED
STATE _____						

PLEASE GIVE 3 PREVIOUS ADDRESSES AND EMPLOYERS

CURRENT ADDRESS _____	LANDLORD _____ PHONE _____	HOW LONG? _____	<input type="checkbox"/> RENT <input type="checkbox"/> OWN
FORMER ADDRESS _____	LANDLORD _____ PHONE _____	HOW LONG? _____	<input type="checkbox"/> RENT <input type="checkbox"/> OWN
FORMER ADDRESS _____	LANDLORD _____ PHONE _____	HOW LONG? _____	<input type="checkbox"/> RENT <input type="checkbox"/> OWN

NAME & ADDRESS OF CURRENT EMPLOYER _____	SUPERVISOR _____ PHONE _____ POSITION _____	DATES EMPLOYED _____ (MTH/YR) TO (MTH/YR)	GROSS SALARY _____ SELF-EMP. - ADJ. GROSS INCOME (MOST RECENT TAX FORMS)
NAME & ADDRESS OF CURRENT/FORMER EMPLOYER _____	SUPERVISOR _____ PHONE _____ POSITION _____	DATES EMPLOYED _____ (MTH/YR) TO (MTH/YR)	GROSS SALARY _____ SELF-EMP. - ADJ. GROSS INCOME (MOST RECENT TAX FORMS)
NAME & ADDRESS OF FORMER EMPLOYER _____	SUPERVISOR _____ PHONE _____ POSITION _____	DATES EMPLOYED _____ (MTH/YR) TO (MTH/YR)	NUMBER OF DEPENDENTS BY AGE 0-5 _____ 6-12 _____ 13-17 _____ 18+ _____ NUMBER LIVING WITH YOU _____

NEAREST RELATIVE NOT LIVING WITH YOU NAME _____	ADDRESS _____	PHONE _____	RELATIONSHIP _____
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