



1700 N. Hwy.35 E., Lewisville, Texas 75067
 Office: (972) 221-7070 Fax: (972) 221-7961

APPLICANT INFORMATION				CO-APPLICANT INFORMATION			
FIRST NAME MIDDLE LAST			FIRST NAME MIDDLE LAST			RELATIONSHIP	
SOCIAL SECURITY NO	BIRTH DATE	US CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED	SOCIAL SECURITY NUMBER	BIRTH DATE	US CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED
CURRENT STREET ADDRESS			<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	CURRENT STREET ADDRESS			<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER
CITY STATE ZIP		HOW LONG?		CITY STATE ZIP		HOW LONG?	
MORTGAGE OR LANDLORD NAME		BALANCE	MO. PAYMENT	MORTGAGE OR LANDLORD NAME		BALANCE	MO. PAYMENT
HOME PHONE		WORK PHONE	PAGER/MOBILE	HOME PHONE		WORK PHONE	PAGER/MOBILE
PREVIOUS ADDRESS CITY STATE ZIP			HOW LONG?	PREVIOUS ADDRESS CITY STATE ZIP			HOW LONG?
OCCUPATION			YEARS IN FIELD	OCCUPATION			YEARS IN FIELD
EMPLOYER			YEARS	EMPLOYER			YEARS
HAVE YOU HAD ANY JUDGMENTS, FORECLOSURES OR BANKRUPTCIES IN THE PAST 10 YEARS? YES NO EXPLAIN:			GROSS MO INCOME	HAVE YOU HAD ANY JUDGMENTS, FORECLOSURES OR BANKRUPTCIES IN THE PAST 10 YEARS? YES NO EXPLAIN:			GROSS MO INCOME
PREVIOUS EMPLOYER			YEARS	PREVIOUS EMPLOYER			YEARS
SOURCE OF OTHER INCOME: ALIMONY, CHILD SUPPORT, ETC.			MO. AMOUNT	SOURCE OF OTHER INCOME: ALIMONY, CHILD SUPPORT, ETC			MO. AMOUNT
SOURCE OF OTHER INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION				SOURCE OF OTHER INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION			
NAMES AND ADDRESS OF REFERENCES NOT LIVING WITH ME NAME ADDRESS PHONE RELATIONSHIP				NAMES AND ADDRESS OF REFERENCES NOT LIVING WITH ME NAME ADDRESS PHONE RELATIONSHIP			
CREDIT INFORMATION				CREDIT INFORMATION			
NAME OF CREDITOR		BALANCE	PAYMENT	NAME OF CREDITOR		BALANCE	PAYMENT
BANK		SAVINGS	CHECKING	BANK		SAVINGS	CHECKING
BANK		SAVINGS	CHECKING	BANK		SAVINGS	CHECKING

I certify that the information given is true, correct and complete and is given for the purpose of obtaining credit, and you and any other creditor or prospective creditor of the undersigned or any agency employed by you or any of them are authorized to make investigations concerning the undersigned or concerning the above information and to disclose to each other the information set forth above and the results of such investigations.
 ANY FAX TRANSMISSION OF MY SIGNATURE WILL BE HELD EQUALLY ENFORCEABLE AS MY GENUINE SIGNATURE.

APPLICANT'S SIGNATURE _____ CO-APPLICANT'S SIGNATURE _____

FOR DEALER USE ONLY <input type="checkbox"/> USED		UNIT INFO: <input type="checkbox"/> NEW		TERM _____ MONTHS	
BOAT	MODELYEAR	MAKE	MODEL	CASH PRICE (INCL. TAXES AND COST OF OFFICIAL TRANSFER, REGISTRATION / FILING FEES, IF ANY) \$ _____	
MOTOR				Gross trade in allowance: \$ _____ Net trade allowance \$ _____	
TRAILER				Pay off on open account \$ _____ Cash Down \$ _____	
TRADE IN				Total Down Payment \$ _____ Amount Financed \$ _____	

