



**CREDIT APPLICATION**

The words "you," "your" and "yours" mean each person submitting this application for credit. The words "we" "us," "our" and "ours" as used in this application refer to the creditor and to any potential assignee to whom the creditor submits your application

**IMPORTANT: Read these Directions before completing this Application. Check appropriate box.**

- If you are applying for individual credit in your own name and are relying on your own income and assets and not the income or assets of another person as the basis for repayment of the credit requested, complete all but the Joint Applicant section of this application.
- If you are applying for joint credit with another person, complete the entire application, providing information about the Applicant and the Joint Applicant. You are applying for joint credit: Applicant Initials: \_\_\_\_\_ Joint-applicant Initials: \_\_\_\_\_
- If you are married and live in a community property state, complete the entire application, providing information for spouse in the Joint Applicant section, but your spouse should NOT sign as a Joint Applicant. Your spouse is not required to and does not need to apply as a Joint Applicant.
- If you are applying for individual credit in your own name **and are** relying on income from alimony, child support, or separate maintenance **or** on the income or assets of another person as the basis for repayment of the credit requested, complete the entire application providing information about the person on who you are relying in the Joint Application section. The other person should NOT sign as a Joint Applicant.

First Name	MI	Last Name	DL #	SS #	DOB
------------	----	-----------	------	------	-----

Have you ever obtained credit under any other name?  YES If yes, full name: \_\_\_\_\_  NO

Street Address		City	State	Zip Code	Time at Address:
Home Phone #	<input type="checkbox"/> Own <input type="checkbox"/> Rent	<input type="checkbox"/> Other	Mortgage or Landlord	Phone #	Monthly Payment
Previous Address (if current less than 3 years)		City	State	Zip Code	Time at Address:
Employer	Occupation		Address		
Length of Time Employed	Work Phone #	Salary \$ _____	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly	<input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Monthly	
Source of Other Income _____ Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.		Other Income \$ _____	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly	<input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Monthly	
Previous Employer (if current less than 3 years)		Occupation	Length of Time Employed		

**CO-APPLICANT INFORMATION**

First Name	MI	Last Name	DL #	SS #	DOB
Home Phone #			Relationship to Applicant		
Street Address		City	State	Zip Code	Time at Address:
Previous Address (if current less than 3 years)		City	State	Zip Code	Time at Address:
Employer	Occupation		Address		
Length of Time Employed	Work Phone #	Salary \$ _____	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly	<input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Monthly	
Source of Other Income _____ Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.		Other Income \$ _____	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly	<input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Monthly	
Previous Employer (if current less than 3 years)		Occupation	Length of Time Employed		