

Website: www.cars-prime.com Email: sales@cars-prime.com

Cell: +1 (786) 643-1241

Address: 2456 NW 94th Ave Doral, FL 33172

Credit Check Form

General Information (Ap	pplicant/Co-Applicant)				
Name:	I	Date of Birth :			
		SSN:			
City:	State:	Zip Code: _		Own_Rent	
Driver's License#:		Exp. Da	te:		
Tag: In	surance Company:				
Phone Number:	Em	ail:			
Date:		Time:			
Employment					
Employer:		Job Title:			
Supervisor:	Fr	om:	To:		
Address:	City:		State:	ZIP:	
Phone:	Salary:	Pav F	requency	7:	

Documentation

Proof of Identity (1 required)

- _ Passport
- _ Driver's License
- _ U.S. Visa

Proof/Source of Income (1

required) _ Pay Stubs 3 months

- _ Bank Statements
- _ W-2 Form

Proof of Residence (1 required)

- _ Credit Card/Bank Statement
- _ Mortgage Statement
- _ Lease Agreement
- _ Utility Bill
- _ Property Tax Bill
- _ Medicaid/Medicare Benefit

Statement _ Homeowners/Renters Insurance Policy

_ Down Payment

I hereby certify that the information contained herein is complete and accurate. I have authorized *Cars Prime LLC* to check my credit and employment history and verify the validity of the information listed in this credit application. I am also aware that the credit report might be used in relation to this credit application. I understand this application form and agree to provide any additional information which may be legally required to determine credit worthiness.

Applicant Signature

Date

^{*}The information provided is protected and kept confidential in compliance with the Fair Credit Reporting Act (FCRA - 15 U.S.C. § 1681 et seq).