

CREDIT APPLICATION

OFFICIAL USE ONLY

INCOME	START DATE _____	TEMP/PERM _____	NET PAY _____	SPOKE WITH _____	INITIALS _____
RESIDENCE	START DATE _____	AMOUNT _____	PAY RECORD _____	SPOKE WITH _____	INITIALS _____
PHONE	CHECK PHONE BOOK _____	CALLED MESSAGE # _____		INITIALS _____	
AMOUNT REQUESTED \$	ADVERTISING SOURCE	PROCEEDS OF CREDIT TO BE USED FOR		DATE	

SECTION A INFORMATION REGARDING APPLICANT

FULL NAME (Last, First, Middle)			BIRTH DATE	SOCIAL SECURITY NUMBER	
PRESENT ADDRESS (Street, City, State & Zip)		OWN <input type="checkbox"/> RENT <input type="checkbox"/>	PAYMENT	HOW LONG AT PRESENT ADDRESS	HOME PHONE
PREVIOUS ADDRESS (Street, City, State & Zip)				HOW LONG AT PREVIOUS ADDRESS?	
PRESENT EMPLOYER (Company, Name & Address)					
HOW LONG WITH PRESENT EMPLOYER	YOUR POSITION OR TITLE		NAME OF SUPERVISOR		BUSINESS PHONE EXT.
PREVIOUS EMPLOYER (Company, Name & Address)				HOW LONG WITH PREVIOUS EMPLOYER?	
NATIVE HOME					
YOUR PRESENT NET SALARY OR COMMISSION \$ PER MONTH	PAY DAY	NUMBER OF DEPENDENTS		AGE OF DEPENDENTS	
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. Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Obligation					
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME				
Have you ever received credit from us?	<input type="checkbox"/> NO <input type="checkbox"/> YES - When?	Checking Account Number _____ Savings Account Number _____		Where? _____ Where? _____	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE NO. (Include Area Code)	

SECTION B INFORMATION REGARDING JOINT APPLICATION OR OTHER PARTY (Use Separate sheet if necessary)

FULL NAME (Last, First, Middle)			BIRTH DATE	SOCIAL SECURITY NUMBER	
RELATIONSHIP TO APPLICANT (IF ANY)	PRESENT ADDRESS (Street, City, State & Zip)	OWN <input type="checkbox"/> RENT <input type="checkbox"/>	PAYMENT	HOW LONG AT PRESENT ADDRESS?	HOME PHONE
PRESENT EMPLOYER (Company, Name & Address)					
HOW LONG WITH PRESENT EMPLOYER?	YOUR POSITION OR TITLE		NAME OF SUPERVISOR		BUSINESS PHONE EXT.
PREVIOUS EMPLOYER (Company, Name & Address)				HOW LONG WITH PREVIOUS EMPLOYER?	
\$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER MONTH	NUMBER OF DEPENDENTS		AGES OF DEPENDENTS	
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. Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Obligation					
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME				
Has joint applicant or other party ever received credit from us?	<input type="checkbox"/> NO <input type="checkbox"/> YES	Checking Account Number _____ Savings Account Number _____		Where? _____ Where? _____	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE NO. (Include Area Code)	

REORDER FROM TECHNOLOGY MEDIA GROUP (800) 777-9091 FORM # LA-1

DESCRIPTION OF ASSETS	VALUE	SUBJECT TO DEBT? YES/NO	SECURITY TO BE PLEDGED	
			MODEL	SERIAL #
AUTOMOBILES (Make, Model, Year) 1.				
2.				

SECTION C OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary.)

CREDITOR	TYPE OF DEBT OR ACCOUNT NUMBER	NAME IN WHICH ACCOUNT IS CARRIED	ORIGINAL DEBT	PRESENT BALANCE	MONTHLY PAYMENTS	PAST DUE? YES/NO
LANDLORD OR MORTGAGE HOLDER AND PHONE #	<input type="checkbox"/> RENT PAYMENT <input type="checkbox"/> MORTGAGE		(Omit Rent) \$	(Omit Rent) \$	\$	
TOTAL DEBT			\$	\$	\$	

Are you a co-maker, endorser, or guarantor on any loan or contract: No Yes - For Whom? To Whom?

Are there any unsettled judgements against you? No Yes - Amount? If "Yes", To Whom Owed?

Have you been declared bankrupt in the last 10 years? No Yes - Where Year?

OTHER OBLIGATIONS (For example, to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)

SECTION D PERSONAL REFERENCES

NAME	RELATION	ADDRESS	PHONE NUMBER

SIGNATURES

Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.

APPLICANT'S SIGNATURE _____ DATE _____ OTHER SIGNATURE (Where Applicable) _____ DATE _____

X X

TOTAL NET DISPOSABLE MONTHLY INCOME		APPROVED <input type="checkbox"/> AMOUNT \$ _____ TERMS _____ X \$ _____ SECURITY _____ DETAILS TO COMPLETE: _____	TURNED DOWN <input type="checkbox"/> REASON <input type="checkbox"/> INCOME <input type="checkbox"/> EXCESSIVE OBLIGATIONS <input type="checkbox"/> INADEQUATE COLLATERAL <input type="checkbox"/> CREDIT REFERENCES <input type="checkbox"/> DELINQUENT CREDIT <input type="checkbox"/> EMPLOYMENT <input type="checkbox"/> RESIDENCE <input type="checkbox"/> CREDIT NOT GRANTED ON THE REQUESTED TERMS AND CONDITIONS <input type="checkbox"/> INFORMATION OBTAINED IN A REPORT FROM A CONSUMER REPORTING AGENCY <input type="checkbox"/> INFORMATION OBTAINED FROM AN OUTSIDE SOURCE OTHER THAN A CONSUMER CREDIT AGENCY
TOTAL MONTHLY INSTALLMENTS INCLUDING NEW PAYMENT ACCOUNT			
RENT/1ST MTG.			
TRANSPORTATION			
GROCERIES			
PHONE/UTILITIES			
OTHER			
TOTAL OUTGO			
DISCRETIONARY INCOME	\$ _____		