

CREDIT APPLICATION

DEALER NAME: DAVENPORT CAPITAL GROUP LLC DEALER CONTACT: MARCELLUS DAVENPORT

DEALER ADDRESS: 6428 DAWSON BLVD, STE 1144, NORCROSS, GA 30093

DEALER PHONE: 470 443 9267 DEALER EMAIL: INFO@DAVENPORTCAPITALGROUPLLC.COM

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: _____

Name (First Middle Last)	DL State	DL #	SS#	DOB
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Have you ever obtained credit under any other name? YES If yes, full name _____ NO

Current Address			Time at Current Address Year(s) Month(s)	
Home Phone #	Cell Phone #	Email Address	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Military <input type="checkbox"/> Other	
Mortgage or Landlord Name		Mortgage or Landlord Phone #	Payment Amount \$ _____	
Previous Address			Time at Previous Address Year(s) Month(s)	
Previous Mortgage or Landlord Name	Previous Mortgage or Landlord Phone #	Payment Amount \$ _____	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Military <input type="checkbox"/> Other	
Current Employer	Current Job Description	Current Employer Address		
Supervisor's Name	Current Work Phone #	Salary \$ _____	Pay Frequency _____	Length of Time Employed Year(s) Month(s)
Previous Employer	Previous Job Description	Previous Employer Address		
Previous Supervisor's Name	Previous Work Phone #	Previous Salary \$ _____	Previous Pay Frequency _____	Length of Time Employed Year(s) Month(s)
Source of Other Income _____		Amount 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.				

CO-APPLICANT INFORMATION

Relationship to Applicant: _____

Name (First Middle Last)	DL State	DL #	SS#	DOB
Current Address			Time at Current Address Year(s) Month(s)	
Home Phone #	Cell Phone #	Email Address	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Military <input type="checkbox"/> Other	
Mortgage or Landlord Name		Mortgage or Landlord Phone #	Payment Amount \$ _____	
Previous Address			Time at Previous Address Year(s) Month(s)	
Previous Mortgage or Landlord Name	Previous Mortgage or Landlord Phone #	Payment Amount \$ _____	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Military <input type="checkbox"/> Other	
Current Employer	Current Job Description	Current Employer Address		
Supervisor's Name	Current Work Phone #	Salary \$ _____	Pay Frequency _____	Length of Time Employed Year(s) Month(s)
Previous Employer	Previous Job Description	Previous Employer Address		
Previous Supervisor's Name	Previous Work Phone #	Previous Salary \$ _____	Previous Pay Frequency _____	Length of Time Employed Year(s) Month(s)
Source of Other Income _____		Amount 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.				

Dealer Name: _____

Applicant's Name(s): _____

FINANCIAL INFORMATION

REFERENCE NAME	REFERENCE PHONES	TYPE	OTHER INFORMATION	ACCOUNT NUMBER	BALANCE
	PHONE 1				
	PHONE 2				
	PHONE 1				
	PHONE 2				
	PHONE 1				
	PHONE 2				
	PHONE 1				
	PHONE 2				
	PHONE 1				
	PHONE 2				

PERSONAL REFERENCES

FULL NAME	ADDRESS	RELATIONSHIP	PHONE

TRADE-IN INFORMATION

Trade-in No. 1	VIN	YEAR	MAKE	MODEL	MILEAGE
Trade-in No. 2	ALLOWANCE	ACV	PAYOFF	LIENHOLDER	

DOWNPAYMENT: \$ _____

You certify that all information provided on this application is true and correct and understand that you are providing it for the purpose of obtaining credit. By signing below, you verify that you have no outstanding obligations (including loans or accounts on which you owe money) to any bank, loan company, corporation or individual except as provided on this application and that there are no suits, judgments, or legal claims of any kind whatsoever pending against you other than as provided on this application. You agree that this application shall remain our and our assignees' property whether or not credit is extended. You authorize us to verify the information provided on this application, to investigate your credit and request additional information from third parties and credit bureaus, including obtaining a credit report and verifying employment.

Pursuant to the Fair Credit Reporting Act, you are notified that your application may be submitted to the finance sources listed below, as well as to other finance sources for the purpose of evaluating you for the extension of credit.

Finance Source(s): _____

APPLICANT'S SIGNATURE	DATE	JOINT APPLICANT'S SIGNATURE	DATE
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Credit References: By signing below, you give us permission to share information about your transactions with us (including, but not limited to, your payment history and repayment performance) with unaffiliated third parties who contact us for a credit reference about you.

APPLICANT'S SIGNATURE	DATE	JOINT APPLICANT'S SIGNATURE	DATE
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Disclosure that applies in the state of Ohio: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law.