

25 Quinta Ct. Suite C, Sacramento, CA 95823 916.682.BION (2466) / 916.689.8080 | Fax: 916.848.0318 | www.bionwater.org

APPLICANT		CRED	IT APP	LICATIO	ON		
Customer Name:							
	Last Name					Mid	dle
ID #:	_ Expiration _			Yea	rs of Res	sidence	
Home Address:			0				Zip
							n:
SSN#:							
☐ House Owner							
Employer:							
							Zip
							ployment
Gross Monthly Incom	9.5		, r osition ,			rears or Em	ployment
Other Income \$							
O-APPLICANT							
Customer Name:							
	Last Name				Name	Mid	dle
ID #:	_ Expiration _						
Date of Birth							
Home Address (if diffe	erent):						
Employer: Employer Phone #							
Gross Monthly Incom						— Hire	Date
Personal References				X-2			
Name			Relations	hip	_	Phone#	
Mdse. Purchase				A 4 .			
widse. Fulcilase						1\$	No. of months
Windlest Comp. 2. in	TRUTH-IN-I		and the second				
ANNUAL	FINANCE CH	Charles of the Control of the Contro				OF PAYMENTS	
The dollar amount of cost of your credit as a will cost you:		you or on you			The amount you will have paid after you have made all your		The total cost of your purechas on credit including your
early rate:					payments	as scheduled:	downpayment of \$
%	\$	\$			\$		\$
OUR PAYMENT SCHE							
Number of Payments Payments			Amount of Payments			When Payments are Due [] Monthly Payments Beginning: Mo/Yr/	
PREPAYMENT: If you pay early, ment default, or any required property that PAYMENT FEE: If you fail Payment Fee of \$29.	you may be entitled to epayment in full before	the scheduled	date and prepa	yment refunds.		uments for any addition	nal information about nonpay-
pplicant Signature			Co-	Applicant S	Signature		
ate							
/lanager's Name			Ref	erral Name			

Best time to confirm and best number to call: _____