

(A) APPLICANT INFORMATION										(B) JOINT APPLICANT INFORMATION											
FULL NAME					DOB					FULL NAME					DOB						
SSN		STREET ADDRESS					APT #			SSN		STREET ADDRESS					APT #				
CITY			STATE		ZIP		HOW LONG? ____YRS ____MOS			CITY			STATE		ZIP		HOW LONG? ____YRS ____MOS				
HOME PHONE		CELL PHONE			MONTHLY RENT/MORTGAGE					HOME PHONE		CELL PHONE			MONTHLY RENT/MORTGAGE						
RESIDENTIAL STATUS <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> WITH RELATIVES <input type="checkbox"/> WITH FRIENDS <input type="checkbox"/> OTHER					LANDLORD/MORTGAGE					RESIDENTIAL STATUS <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> WITH RELATIVES <input type="checkbox"/> WITH FRIENDS <input type="checkbox"/> OTHER					LANDLORD/MORTGAGE						
LANDLORD PHONE		PREVIOUS ADDRESS (if less than 2 yrs at current address)					APT #			LANDLORD PHONE		PREVIOUS ADDRESS (if less than 2 yrs at current address)					APT #				
CITY			STATE		ZIP		HOW LONG? ____YRS ____MOS			CITY			STATE		ZIP		HOW LONG? ____YRS ____MOS				
CURRENT EMPLOYER					GROSS MONTHLY SALARY					CURRENT EMPLOYER					GROSS MONTHLY SALARY						
CURRENT EMPLOYER'S ADDRESS				CITY			STATE			CURRENT EMPLOYER ADDRESS				CITY			STATE				
ZIP	WORK PHONE		HOW LONG? ____YRS ____MOS		OCCUPATION/JOB TITLE					ZIP	WORK PHONE		HOW LONG? ____YRS ____MOS		OCCUPATION/JOB TITLE						
PREVIOUS EMPLOYER (if less than 2 years at current job)					GROSS MONTHLY SALARY					PREVIOUS EMPLOYER (if less than 2 years at current job)					GROSS MONTHLY SALARY						
PREVIOUS EMPLOYER'S FULL ADDRESS					PHONE					PREVIOUS EMPLOYER'S FULL ADDRESS					PHONE						
STATE	ZIP	HOW LONG? ____YRS ____MOS		OCCUPATION/JOB TITLE					STATE	ZIP	HOW LONG? ____YRS ____MOS		OCCUPATION/JOB TITLE								
SECONDARY EMPLOYER NAME (if applicable)			SECONDARY EMPLOYER ADDRESS							SECONDARY EMPLOYER NAME (if applicable)			SECONDARY EMPLOYER ADDRESS								
CITY		STATE		ZIP		GROSS MONTHLY SALARY					CITY		STATE		ZIP		GROSS MONTHLY SALARY				
SECONDARY EMPLOYER PHONE			HOW LONG? ____YRS ____MOS		OCCUPATION/ JOB TITLE					SECONDARY EMPLOYER PHONE			HOW LONG? ____YRS ____MOS		OCCUPATION/JOB TITLE						
<b>OTHER INCOME NOTE:</b> Alimony, child support, or separate maintenance incomes do not have to be revealed unless the applicant wishes to have such sources considered as a basis for repayment of the requested credit amount.																					
GROSS MONTHLY OTHER INCOME				OTHER INCOME SOURCE						GROSS MONTHLY OTHER INCOME				OTHER INCOME SOURCE							
REFERENCE 1					PHONE			ADDRESS					RELATIONSHIP								
REFERENCE 2					PHONE			ADDRESS					RELATIONSHIP								
BANK REFERENCE										<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS											

### FAIR CREDIT REPORTING ACT TO CONSUMER

THIS WILL ADVISE YOU THAT YOUR RETAIL INSTALLMENT SALES CONTRACT AND BUYER'S APPLICATION FOR SECURED DEBT WILL BE SUBMITTED TO FINANCIAL INSTITUTIONS AND THEIR AFFILIATES, INCLUDING SOME OF THE FOLLOWING: TRUSTMARK NATIONAL BANK, CAPITALONE BANK, WELLS FARGO AUTO FINANCE, CRESCENT BANK & TRUST, AMERICREDIT FINANCIAL SERVICES AND TIDEWATER MOTOR CREDIT FOR PURCHASE AND CONSIDERATION AS TO WHETHER YOU MEET THEIR CREDIT REQUIREMENTS.

THE UNDERSIGNED FURTHER AUTHORIZES THESE FINANCIAL INSTITUTIONS AND THEIR AFFILIATES TO OBTAIN SUCH INFORMATION THAT THEY MAY REQUIRE IN ORDER TO VERIFY INFORMATION RELATIVE TO THIS REQUEST INCLUDING CONTACTING SPOUSES TO VERIFY SPOUSE RELATED INFORMATION.

I CERTIFY THAT ALL INFORMATION GIVEN BY ME ON THIS APPLICATION IS COMPLETE AND ACCURATE. I GIVE MY PERMISSION FOR ANY FINANCIAL INSTITUTION WHICH WILL REVIEW THIS CREDIT APPLICATION, TO INVESTIGATE MY CREDIT AND EMPLOYMENT HISTORY, AND TO ANSWER QUESTIONS ABOUT THEIR CREDIT EXPERIENCE WITH ME INCLUDING BUT NOT LIMITED TO LATE PAYMENTS, MISSED PAYMENTS OR OTHER DEFAULTS, AND THIS INFORMATION MAY BE REPORTED IN YOUR CREDIT REPORT.

TO HELP THE GOVERNMENT FIGHT THE FUNDING OF TERRORISM AND MONEY LAUNDERING ACTIVITIES, FEDERAL LAW REQUIRES ALL FINANCIAL INSTITUTIONS TO OBTAIN, VERIFY, AND RECORD ALL INFORMATION THAT IDENTIFIES EACH PERSON WHO OPENS AN ACCOUNT.

WHAT THIS MEANS FOR YOU: WHEN YOU OPEN AN ACCOUNT, WE WILL ASK FOR YOUR NAME, ADDRESS, DATE OF BIRTH, AND OTHER INFORMATION THAT WILL ALLOW US TO IDENTIFY YOU. WE WILL ASK TO SEE YOUR DRIVER'S LICENSE OR OTHER IDENTIFYING DOCUMENTS.

APPLICANT  
SIGNATURE \_\_\_\_\_  
REQUIRED \_\_\_\_\_ DATE \_\_\_\_\_

(A) APPLICANT Driver's License No. \_\_\_\_\_

JOINT APPLICANT  
SIGNATURE \_\_\_\_\_  
REQUIRED \_\_\_\_\_ (means you intend to apply for joint credit) DATE \_\_\_\_\_

(B) JOINT APPLICANT Driver's License No. \_\_\_\_\_

### FOR DEALER USE ONLY

NEW	USED	DEMO	YEAR	MAKE	BOOK VALUE		
						CASH SELLING PRICE	_____
						NET TRADE	_____
						CASH DOWN	_____
						UNPAID BALANCE	_____
						PLUS INSURANCE & FEES	_____
						TOTAL AMOUNT FINANCED	_____
MODEL		BODY STYLE		MILEAGE			
TRADE IN YEAR		MAKE		MODEL		LIENHOLDER	
TERM		RATE		AMOUNT		DEALER	