



**Consumer Credit Application Dealer:** \_\_\_\_\_  
**Phone: (678) 866-8954**

**Fax: (866) 822-3514**

APPLICANT INFORMATION				CO-APPLICANT INFORMATION			
<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (SINGLE, DIVORCED, WIDOWED)				(By providing Co-Applicant information, you confirm your intent to apply for joint credit and be jointly liable for the debt.)			
PRINT FULL NAME				PRINT FULL NAME			
DOB	SSN	# OF DEPENDENTS		DOB	SSN	# OF DEPENDENTS	
STREET ADDRESS				STREET ADDRESS			
CITY	STATE	ZIPCODE		CITY	STATE	ZIPCODE	
HOW LONG?	HOME PHONE	CELL PHONE		HOW LONG?	HOME PHONE	CELL PHONE	
RESIDENTIAL STATUS		MONTHLY RENT/MORTGAGEPMT		RESIDENTIAL STATUS		MONTHLY RENT/MORTGAGEPMT	
PREVIOUS ADDRESS (if less than 2 yrs at current address)				PREVIOUS ADDRESS (if less than 2 yrs at current address)			
CURRENT EMPLOYER'S NAME (OR RETIRED)				CURRENT EMPLOYER'S NAME			
CURRENT EMPLOYER'S ADDRESS				CURRENT EMPLOYER'S ADDRESS			
GROSS MONTHLY SALARY		WORK PHONE		GROSS MONTHLY SALARY		WORK PHONE	
OCCUPATION/JOB TITLE			HOW LONG?	OCCUPATION/JOB TITLE			HOW LONG?
PREVIOUS EMPLOYER (if less than 2 yrs on current job)			HOW LONG?	PREVIOUS EMPLOYER (if less than 2 yrs on current job)			HOW LONG?
<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	
NEAREST RELATIVE NOT LIVING WITH YOU (APPLICANT)		PHONE	ADDRESS			RELATIONSHIP	
NEAREST RELATIVE NOT LIVING WITH YOU (CO-APPLICANT)		PHONE	ADDRESS			RELATIONSHIP	

**FAIR CREDIT REPORTING ACT TO CONSUMER**

I CONFIRM THAT ALL INFORMATION PROVIDED IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE FIRST APPROVAL SOURCE LLC AND ITS AFFILIATED LENDING INSTITUTIONS TO VERIFY INFORMATION FROM SOURCES PROVIDED AND TO OBTAIN CREDIT INFORMATION FROM LOCAL AND/OR NATIONAL CREDIT REPORTING AGENCIES. THIS APPLICATION SHALL BE AND SHALL REMAIN THE PROPERTY OF THE LENDER.

IF CREDIT IS EXTENDED, THE PARTY OR PARTIES EXTENDING CREDIT OR HOLDING SUCH CREDIT MAY ORDER ADDITIONAL CONSUMER REPORTS IN CONNECTION WITH ANY UPDATE, RENEWAL OR EXTENSION OF THE CREDIT. IF YOU ASK, YOU WILL BE TOLD WHETHER A CONSUMER REPORT WAS REQUESTED AND, IF SO, THE NAME AND ADDRESS OF ANY CONSUMER REPORTING AGENCY (CREDIT BUREAU) FROM WHICH SUCH CREDIT REPORT WAS OBTAINED.

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

CO-APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 REQUIRED

APPLICANT Driver's License No./St. \_\_\_\_\_ / \_\_\_\_\_

CO-APPLICANT Driver's License No./St. \_\_\_\_\_ / \_\_\_\_\_

**FOR DEALER USE ONLY**

Unit Purchased:	Year	Make	Model	New	Used	Invoice	Book Value
Trade In:				Motor:			
Selling Price:				Trailer:			
Net Trade:			Allowance:			Pay Off:	
Cash Down:							
Sales Tax:							
Warranty:							
Other:							
AMOUNT FINANCED:				Term:			