

CREDIT APPLICATION

Application for Credit Used in Any Sale of Vehicle Governed by NRS 97.299

SECTION A

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 or assets and not the income or assets of another person as the basis for repayment of the credit requested.
- ☐ If you are married and live in a community property state complete all sections, including Section C, providing information about your spouse.
- ☐ If this is an application for joint credit with another person complete all sections providing information in Section C about the co-applicant.

NOTE: APPLICANT, IF MARRIED, MAY APPLY FOR A SEPARATE ACCOUNT.

Seller: _____

Stock No.: _____

Date: _____

Amount requested: \$ _____

SECTION B: Information regarding applicant.				SECTION C: Information regarding spouse or co-applicant. (Use separate sheets if necessary.)			
Print Full Name		Birth Date		Print Full Name		Birth Date	
Driver's License No.		Social Security No.		Driver's License No.		Social Security No.	
Ages of Dependents:		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated		Ages of Dependents:		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	
Street Address		City		Street Address		City	
State	Zip	How Long? ____ Yrs ____ Mos		State	Zip	How Long? ____ Yrs ____	
Phone		Phone		Phone		Phone	
Previous Address (To cover 3 years' residence)		Lived in Community? ____ Yrs ____ Mos		Previous Address (To cover 3 years' residence)		Lived in Community? ____ Yrs ____ Mos	
		Lived in Community? ____ Yrs ____ Mos				Lived in Community? ____ Yrs ____ Mos	
Occupation or Rank	Employer	How Long? ____ Yrs ____ Mos		Occupation or Rank	Employer	How Long? ____ Yrs ____ Mos	
Employer's Address		Dept. or Badge No.	Phone	Employer's Address		Dept. or Badge No.	Phone
Employer (to cover 2-year history)		How Long? ____ Yrs ____ Mos		Employer (to cover 2-year history)		How Long? ____ Yrs ____ Mos	
Address				Address			
Nearest relative not living with me: Name: Relationship:				Nearest relative not living with me: Name: Relationship:			
Address		Phone		Address		Phone	

INCOME:	INCOME:
Applicant's gross monthly income from employment: \$ _____	Co-Applicant's gross monthly income from employment: \$ _____
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 understanding Amount: \$ _____	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 understanding Amount: \$ _____
Amount of other monthly income and source(s): _____ \$ _____	Amount of other monthly income and source(s): _____ \$ _____
Total monthly income: \$ _____	Total monthly income: \$ _____

Complete ONLY if transaction involves the purchase of a recreational vehicle to be occupied by applicant as applicant's principal residence and the transaction will be secured by the recreational vehicle.

The following information is required by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish the information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish the information, under federal regulations the lender is required to note race or national origin and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

APPLICANT : <input type="checkbox"/> I do not wish to furnish this information.	CO-APPLICANT : <input type="checkbox"/> I do not wish to furnish this information.
RACE/NATIONAL ORIGIN: <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Asian, Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other (Specify): _____	RACE/NATIONAL ORIGIN: <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Asian, Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other (Specify): _____
SEX: <input type="checkbox"/> Female <input type="checkbox"/> Male	SEX: <input type="checkbox"/> Female <input type="checkbox"/> Male

SECTION D ASSET AND DEBT INFORMATION

(If Section C has been completed, this section should be completed giving information about both the Applicant and Joint Applicant or Other Person. Please mark Applicant-related information with an "A." If Section C was not completed, only give information about the Applicant in this section.)

Landlord or Mortgage Holder: Own: ☐ Rent: ☐
Name: _____ Account no.: _____
Address: _____
Mortgage balance: \$ _____ Payment or rent: \$ _____ Date home purchased: _____
Age of home: _____ Price paid for home: \$ _____ Estimated value: \$ _____
2nd mortgage amount: \$ _____ Payment: \$ _____
Furniture owned No. rooms: _____ To whom balance of furniture owed: _____
Balance owed: \$ _____ Estimated value: \$ _____

List all obligations:

Type of credit: _____ Name of company: _____ Open: ☐ Closed: ☐
Name in which account carried: _____ Address: _____
Balance: \$ _____ High: \$ _____ Monthly payments or date closed: \$ _____
Type of credit: _____ Name of company: _____ Open: ☐ Closed: ☐
Name in which account carried: _____ Address: _____
Balance: \$ _____ High: \$ _____ Monthly payments or date closed: \$ _____
Type of credit: _____ Name of company: _____ Open: ☐ Closed: ☐
Name in which account carried: _____ Address: _____
Balance: \$ _____ High: \$ _____ Monthly payments or date closed: \$ _____
Type of credit: _____ Name of company: _____ Open: ☐ Closed: ☐
Name in which account carried: _____ Address: _____
Balance: \$ _____ High: \$ _____ Monthly payments or date closed: \$ _____
Type of credit: _____ Name of company: _____ Open: ☐ Closed: ☐
Name in which account carried: _____ Address: _____
Balance: \$ _____ High: \$ _____ Monthly payments or date closed: \$ _____

Vehicle(s) purchased from: _____ Financed by: _____
Address: _____ \$ _____
Vehicle(s) purchased from: _____ Financed by: _____
Address: _____ \$ _____

Bank reference: _____ Branch: _____
Checking balance: \$ _____ A/C # _____
Savings balance: \$ _____ A/C # _____ Loan balance: \$ _____ A/C # _____
Have you ever had any property repossessed? ☐ Yes ☐ No
Do you have any suits pending against you? ☐ Yes ☐ No
Have you filed bankruptcy in the past 4 years? ☐ Yes ☐ No
Military/Reserve? ☐ No ☐ Yes: ☐ Active ☐ Inactive

Personal friends over one year:

1. Name: _____ Phone: _____
Address: _____
2. Name: _____ Phone: _____
Address: _____

SECTION E INSURANCE

If you wish to apply for vehicle insurance in connection with this credit application, complete the following:

Note: No person is required as a condition precedent to financing the purchase of a vehicle to purchase insurance through a particular insurance company, agent or broker.

Previous insurance company or agent: Name: _____
Address: _____
Policy No.: _____ Where will vehicle be garaged? _____
Has your insurance ever been cancelled by any company? _____ If so, why? _____
No. of insurance losses in past 5 years: _____ Total amount of losses: \$ _____

SECTION F

The undersigned (1) makes the above representations, which are certified correct, for the purpose of securing credit, (2) authorizes the Financial Institution to gather whatever credit and employment history it considers necessary and appropriate, and also the Financial Institution to give information concerning the transaction to others, and (3) understands that we will retain this application whether or not it is approved.

The Financial Institution named below may be requested to purchase a sales finance contract written, or to be written, in connection with your purchase. You are notified pursuant to the Fair Credit Reporting Act that your application may be submitted to them.

Financial Institution: _____ Address: _____

Purchaser hereby acknowledges receipt of a copy of this credit statement.

Applicant's signature: _____ Other signature: _____

SECTION G FOR SELLER'S USE ONLY

1. Total Price	\$ _____	4. Other Charges	
2. Down Payment:	\$ _____	(Specify) \$ _____	\$ _____ \$ _____
Cash:	\$ _____	Invoice:	\$ _____
Net Trade:	\$ _____	5. Time Balance (Add 3 and 4)	\$ _____
(Trade Allowance: \$ _____)		6. Payable in _____ Mo. Installments of	\$ _____
(Owed on Trade \$ _____)		Annual Percentage Rate _____%	
3. Unpaid Balance (Subtract 2 from 1)	\$ _____	Used Car Miles	_____

Year _____ Make _____ Model _____ Body Style _____
☐ New ☐ Used Vehicle Identification No. _____

Optional Equipment:

☐ Air Conditioner ☐ Power Steering ☐ Power Brakes
☐ Automatic Transmission ☐ Other

Trade _____ Make _____ Model _____ Body Style _____
Dealer Name _____ Year _____