CREDIT APPLICATION

Dealer: CH	EEMA	AUTO					
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, complete Sections A and C. If this is an application for joint credit with another person, complete all Sections, providing information in Section B about the joint applicant. We intend to apply for joint credit (please initial). <u>Applicant</u> <u>Applicant</u>					
	☐ If you are applying for individual credit, but are relying on income from alimony, child su maintenance or on the income or assets of another person as the basis for repayment of the complete all sections to the extent possible, providing information in Section B about the palimony, support, or maintenance payments or income or assets you are relying.						
Amount Ree	queste	ed: Payment Date Desired:	Proceeds of Credit to be Us	ed for:			

SECTION A – APPLICANT INFORMATION

Full Name (Last, First, Middle):	E-mail:						
Social Security No.:	Driver's License No.:			State:Birthdate:			
Current Street Address:				How long?	Yrs.	Mos.	
City:				Phone(C):			
Housing Status (Mortgage, Rent, etc.):				Monthly Rent/Mortg	age: \$		
Landlord/Mortgage Holder:				Landlord Phone:			
Previous Street Address:				How long?	Yrs	Mos.	
City:	State:	Zip:	Monthly Rent/M	ortgage at Previous Address	s: \$		
Employment Status (Employed, Retired,	etc.):			Salary: \$			
Current Employer:			Phone:	How long?	Yrs	Mos.	
Position/Occupation:							
Previous Employer:				How long?	Yrs	Mos.	
Alimony, child support, or separate main this obligation.	ntenance inc	ome need not be r	revealed if you do not	wish to have it considered a	as a basis for	r repaying	
Other Income: \$ per		Source of oth	er income:				
Reference:		Relationship:		Phone:		<u></u>	
Address:							
Bank Reference:				Checking Savings			
Relationship to Applicant (Spouse, Relati Full Name (Last, First, Middle):				-mail:			
Social Security No.:		Driver's License N	lo.:	State: Birtho	date:		
Current Street Address:				How long?	Yrs	Mos.	
City:	State:	Zip:	Phone(H):	Phone(C):			
Housing Status (Mortgage, Rent, etc.):				Monthly Rent/Mortg	age: \$		
Landlord/Mortgage Holder:				Landlord Phone:			
Previous Street Address:		-		How long?	Yrs	Mos.	
City: State:_		Zip:	Monthly Rent/M	lortgage at Previous Address	s: \$		
Employment Status (Employed, Retired,	etc.):			Salary: \$			
Current Employer:			Phone:	How long?	Yrs	Mos.	
Position/Occupation:		Employer Ad	dress:				
Previous Employer:				How long?	Yrs	Mos.	
Alimony, child support, or separate main this obligation.	ntenance inc	ome need not be	revealed if you do not	wish to have it considered	as a basis fo	r repaying	
Other Income: \$ per		Source of oth	ner income:				
Reference:		Relationship		Phone:			
Address:							
Bank Reference:		Phone:		Checking Savings			

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