

CREDIT APPLICATION



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APPLICANT INFORMATION (MARRIED MAY APPLY AS INDIVIDUAL)

APPLICANT (PRINCIPAL DRIVER OF VEHICLE)					JOINT APPLICANT - RELATIONSHIP _____				
FIRST NAME	MI	LAST		<input type="checkbox"/> SR <input type="checkbox"/> JR	FIRST NAME	MI	LAST		<input type="checkbox"/> SR <input type="checkbox"/> JR
STREET ADDRESS			APT#	HOW LONG? YRS MOS	STREET ADDRESS			APT#	HOW LONG? YRS MOS
CITY	STATE	ZIP	HOME PHONE ()		CITY	STATE	ZIP	HOME PHONE ()	
DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER			DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER		
<input type="checkbox"/> OWN/BUYING	<input type="checkbox"/> LIVE WITH RELATIVE	MONTHLY PAYMENT			<input type="checkbox"/> OWN/BUYING	<input type="checkbox"/> LIVE WITH RELATIVE	MONTHLY PAYMENT		
<input type="checkbox"/> MONTHLY PAYMENT	<input type="checkbox"/> OTHER _____	\$			<input type="checkbox"/> MONTHLY PAYMENT	<input type="checkbox"/> OTHER _____	\$		

EMPLOYMENT

APPLICANT (PRINCIPAL DRIVER OF VEHICLE)				JOINT APPLICANT - RELATIONSHIP _____			
EMPLOYER NAME		HOW LONG? YRS MOS		EMPLOYER NAME		HOW LONG? YRS MOS	
EMPLOYER ADDRESS				EMPLOYER ADDRESS			
POSITION/TITLE	WORK PHONE ()	GROSS ANNUAL SALARY \$		POSITION/TITLE	WORK PHONE ()	GROSS ANNUAL SALARY \$	
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 DEBT. OTHER INCOME SOURCE:		ANNUAL 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 DEBT. OTHER INCOME SOURCE:		ANNUAL AMOUNT \$	
PREVIOUS EMPLOYER OR SCHOOL		HOW LONG? YRS MOS		PREVIOUS EMPLOYER OR SCHOOL		HOW LONG? YRS MOS	

SIGN

NOTICE: I, THE UNDERSIGNED, HEREBY AUTHORIZE **MY OWN CAR GUY, INC** TO SUBMIT THIS APPLICATION TO DEALER OF CHOICE TO VERIFY CREDIT AND EMPLOYMENT HISTORY AS STATED ABOVE AND TO ANSWER QUESTIONS ABOUT CREDIT EXPERIENCE WITH ME. IF THIS APPLICATION IS MADE PURSUANT TO ANY CREDIT PROGRAM FOR ATTENDEES AND/OR GRADUATES OF SCHOOLS OR EDUCATIONAL INSTITUTIONS, THEN PROSPECTIVE CREDITORS MAY VERIFY MY ELIGIBILITY FOR SUCH PROGRAM, INCLUDING BY INQUIRY TO MY SCHOOL(S) OR EDUCATIONAL INSTITUTION(S). INSURANCE RELATED TO THE CREDIT FOR WHICH I AM APPLYING MAY BE PURCHASED FROM AN INSURER OR AGENT OF MY CHOICE WHO MEETS PROSPECTIVE CREDITOR STANDARDS. IN CONNECTION WITH THIS APPLICATION FOR CREDIT, PROSPECTIVE CREDITORS MAY REQUEST A CONSUMER (CREDIT) REPORT. ON MY REQUEST, PROSPECTIVE CREDITORS WILL ADVISE ME IF THE REPORT WAS ACTUALLY ORDERED AND IF SO, THE NAME AND ADDRESS OF THE AGENCY THAT FURNISHED THE REPORT. PROSPECTIVE CREDITORS MAY ORDER SUBSEQUENT CONSUMER (CREDIT) REPORTS.

I AUTHORIZE PROSPECTIVE CREDITORS TO ASK MY PAST AND CURRENT CREDITORS ("CREDIT REFERENCES"), INCLUDING CREDITORS LISTED ABOVE OR ON MY CONSUMER (CREDIT) REPORT, ABOUT MY CREDIT PERFORMANCE WITH THEM. PROVISION BY PROSPECTIVE CREDITORS OF A COPY OF THIS AUTHORIZATION SHALL SERVE AS MY DIRECTION THAT MY CREDIT REFERENCES PROVIDE MY CREDIT PERFORMANCE INFORMATION.

EVERYTHING THAT I HAVE STATED IN THIS APPLICATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND CONSTITUTES MY ENTIRE APPLICATION FOR CREDIT WITH THE PROSPECTIVE CREDITORS. I UNDERSTAND THAT PROSPECTIVE CREDITORS WILL RETAIN THIS APPLICATION WHETHER OR NOT IT IS APPROVED. I WILL NOTIFY PROSPECTIVE CREDITORS, IF APPLICABLE, WITHIN A REASONABLE TIME OF ANY CHANGE IN MY NAME, ADDRESS OR EMPLOYMENT.

TO THE EXTENT PERMITTED BY LAW, I CONSENT THAT YOU, YOUR ASSIGNEES, AND YOUR AGENTS MAY CONTACT ME AT ANY TELEPHONE NUMBER YOU HAVE FOR ME, INCLUDING ANY CELL PHONE NUMBERS AND ANY PHONE NUMBERS LISTED ON THIS DOCUMENT, BY ANY MEANS YOU SELECT, INCLUDING AN AUTOMATIC TELEPHONE DIALING SYSTEM, TEXT MESSAGING, AND/OR AN ARTIFICIAL OR PRE-RECORDED VOICE.

CO-APPLICANT'S SIGNATURE MEANS YOU INTEND ON APPLYING FOR JOINT-CREDIT.

X _____ **X** _____