# **CONSUMER CREDIT APPLICATION**

## Name/Address

|  |  |
| --- | --- |
| Name | Social Security Number |
| Address: |
| City: State/Province: Postal code: Phone: Work: |
| Own Rent (Please circle) Monthly payment or rent How long? |
| **Previous Address:**City: State/Province: Postal code: Phone: Work:  |
| Owned Rented (Please circle) Monthly payment or rent  How long? |

## Employment History

|  |
| --- |
| Employer: Job Title: |
| Address: Supervisor: |
| City: State/Province: Postal code:  Salary: |
| Phone: Date From: Date To: |
| Employer: Job Title: |
| Address: Supervisor: |
| City: State/Province: Postal code:  Salary: |
| Phone: Date From: Date To: |

**Source of Income Total Expenses Total**

|  |  |  |  |
| --- | --- | --- | --- |
| Salary |  | Loans |  |
| Bonuses & Commissions |  | Charge Account bills |  |
| Income From Rental Property |  | Monthly Bills |  |
| Investment Income |  | Real Estate Mortgages |  |
| Other Income |  | Other Debts -- Itemise |  |
|  |  |  |  |
| **Total Income** |  | **Total Expenses** |  |

**Bank References**

|  |  |  |
| --- | --- | --- |
| Institution Name: | Institution Name: | Institution Name: |
| Checking Account # | Savings Account # | Loan # | Loan Balance: |
| Address: | Address: | Address: |
| Contact/Phone: | Contact/Phone: | Contact/Phone: |

**Credit Cards**

|  |  |  |
| --- | --- | --- |
| Type: | Account No. | Current Balance |
| Type: | Account No. | Current Balance |
| Type: | Account No. | Current Balance |

**BANKRUPTCY:**

Have you gone bankrupt in the last five years? ( ) Yes ( ) No

If yes, give date of assignment:\_\_­­­\_\_\_\_\_\_

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorise the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

 Signature Date