

99 W HAWTHORNE AVE
VALLEY STREAM, NY 11580



TEL. 516-872-8153
FAX: 516-872-0270

DEALER'S NAME _____ DATE _____

TEL.#() _____ FAX # () _____

CREDIT APPLICATION

PURCHASER INFORMATION:

_____ BUYER _____ CO-BUYER FOR _____ RELATION TO BUYER _____

FIRST NAME _____ LAST NAME _____ DOB _____

SSN # _____ - _____ - _____

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____ YEARS THERE _____

OWN _____ RENT _____ OTHER _____ AMOUNT PER MONTH \$ _____

HOME TEL # () _____ CELL PHONE # () _____ EMAIL _____

EMPLOYMENT INFORMATION:

CURRENT EMPLOYER _____ WORK TEL. # _____

EMPLOYER ADDRESS _____

YEARS THERE _____ MONTHS _____ POSITION _____ SUPERVISOR _____

GROSS INCOME \$ _____

SOURCE OF OTHER INCOME / 2ND JOB / PREVIOUS EMPLOYER: (PLEASE CIRCLE ONE)

EMPLOYER NAME _____ WORK TEL.# () _____

ADDRESS _____ HOW LONG _____ POSITION _____

GROSS INCOME \$ _____

PREVIOUS EMPLOYER (IF LESS THAN 1 YEAR)

EMPLOYER NAME _____ WORK TEL. # () _____

YEARS THERE _____ ANNUAL INCOME \$ _____

About your income: Alimony, Child Support, or Separate Maintenance Income need to be revealed if you do not wish to have it considered as a basis for repaying this obligation. All income listed must be documented by paystubs & W2 or Tax Returns. I hereby authorize me employer to release information pertaining to my current employment status, including income verification.

VEHICLE INFORMATION :

YEAR _____ MAKE _____ MODEL _____ MILEAGE _____

VIN # _____ COLOR _____

SELLING PRICES \$ _____ CASH DOWN PAYMT \$ _____ TRADE \$ _____

PAYOFF AMOUNT \$ _____ DEFERRED BALANCE \$ _____

APPLICANT'S STATEMENT I/We have completely and correctly answered all the questions on this application and understand that Auto Factors, Inc will rely on the answers given. During the review of my application, Auto Factors, INC, may obtain a credit report on me, and if my application is approved, Auto Factors Inc, may at any time in the future obtain any additional credit reports to review my account. I /We have the right to ask for the name and address of the credit reporting agency which gave Auto Factors Inc, the credit report. This application will be processed by and remain the property of Auto factors Inc. By signing this application, I/ We authorize my employer to release personal employment information regarding me tenure, salary, occupation, and garnishee record (if any) to Auto Factors Inc. I understand that my employer's reply will be held in confidence and without any liability to my employer. I /We also authorize you to release to and or obtain from third parties any information disclosed on this application, my transactions with you, and my transactions with third parties.

PURCHASER SIGNATURE _____

THANK YOU FOR YOUR BUSINESS