

CORVETTES & CLASSICS CREDIT APPLICATION Fax to 281 875 1965 when complete

Please specify if you are applying: alone, with a co-applicant or as a co-signer		SECURITY: car make/model/year		AMOUNT REQUESTED \$	
APPLICANT			JOINT APPLICANT		
NAME		DATE OF BIRTH	NAME		DATE OF BIRTH
PRESENT ADDRESS _____ OWN _____ RENT If own Purchase price \$ Current value \$ STREET _____ CITY / STATE / ZIP _____			PRESENT ADDRESS _____ OWN _____ RENT If own Purchase price \$ Current value \$ STREET _____ CITY / STATE / ZIP _____		
FORMER ADDRESS (IF LESS THAN 5 YEARS) STREET _____ CITY / STATE / ZIP _____			FORMER ADDRESS (IF LESS THAN 5 YEARS) STREET _____ CITY / STATE / ZIP _____		
MARITAL STATUS	# DEPENDENTS & AGE		MARITAL STATUS	# DEPENDENTS & AGE	
SOCIAL SECURITY	HOME PHONE	BUSINESS PHONE	SOCIAL SECURITY	HOME PHONE	BUSINESS PHONE
EMPLOYMENT INFORMATION					
NAME AND ADDRESS OF EMPLOYER			NAME AND ADDRESS OF EMPLOYER		
YEARS ON JOB _____			YEARS ON JOB _____		
YEARS IN THIS LINE OF WORK _____			YEARS IN THIS LINE OF WORK _____		
POSITION / TITLE		GROSS MONTHLY INCOME	POSITION / TITLE		GROSS MONTHLY INCOME
Previous employer (within last 5 years) Name and address			Previous employer (within last 5 years) Name and address		
Position	How long with this employer?	Gross monthly income \$	Position	How long with this employer?	Gross monthly income \$
OTHER INCOME					
I do not have to reveal alimony, child support, or maintenance income unless I wish it to be considered as a basis for repayment.			Monthly amount \$		
Nature of income:			How long income will continue:		
Bank references (mine or my co-applicants)					
Bank reference (name and city)		Type of account (checking, savings, credit line, loan)	Applicant's driver's license number	Co applicants driver's license number	
First personal reference (name and address):		Second personal reference (name and address)	Nearest relative not living with you (name and address)		
CREDIT OBLIGATIONS: I will include those of my co-applicant if different than my own					
DESCRIPTION	Creditor name	Monthly payment/balance outstanding	DESCRIPTION	Creditor name	Mthly payment/balance outstanding
Dwelling		\$ \$	Credit account		\$ \$
Auto loan		\$ \$	Credit account		\$ \$
Other loan		\$ \$	Credit account		\$ \$
Last vehicle financed	Creditor	Balance due or date paid	Trade-in on this vehicle?	If yes what make/model?	
OTHER					
Insurance information		Monthly payments	Balance outstanding	Insurance company name	Policy number
Total other obligations including alimony, support payments, day care, etc. Describe:				Insurance agent name	Telephone
THESE QUESTIONS APPLY TO BOTH APPLICANT AND JOINT APPLICANT					
ANSWER YES OR NO TO THE FOLLOWING:		APPLICANT	JOINT APPLICANT	If you answered "yes" to any of these questions explain below	
Have you ever filed for bankruptcy?					
Are there any claims, Suits or judgments against you?					
Have you ever been convicted of a felony?					
Are you a cosigner or guarantor for anyone?					
I certify that the information stated in this application is true, correct to the best of my knowledge and a complete statement of my financial condition. I understand this application will be retained whether or not it is approved. You and subsequent creditor are authorized to check my credit and employment history, to answer questions about credit experience with me and to disclose credit information to each other.					
Signature of Applicant		Date	Signature of Joint Applicant		Date