

Section A-Please Tell Us What You Want to Borrow Walk-In Mail-In Telephone

Amount of Loan \$ _____ **Number of Months (Term):** _____

I am applying for:

Installation Loan

Purpose:

Type of Equipment _____

Home Modifications _____

Automobile with Modifications _____

Ramp _____

Vehicle Modifications _____

If you are securing your loan, please describe your collateral: _____

Have you had a recent bankruptcy? Yes No If yes, discharge date _____

Section B-Please Tell Us About Yourself

First Name	Initial	Last Name	Date of Birth	Social Security No.	
Home Address (Other than P.O. Box)			City	State	Zip
Mailing Address (If different from home address)			City	State	Zip
Home Phone	Cellular Phone	Pager Phone	Fax Phone	<input type="checkbox"/> Home <input type="checkbox"/> Business	Internet Address
<input type="checkbox"/> Rent Own/Buying	<input type="checkbox"/> Live W/Others	Monthly Rent/Mortgage Payment \$	Landlord / Mortgagor		Yrs/Mths There Yrs. Mths.
Previous Address (if less than 2 years at above)			City	State	ZIP
Name and Address of Employer*			Position / Occupation	Yrs/Mths There Yrs. Mths.	Gross Annual Salary \$
Name and Address of Previous Employer* (if less than 2 years at current employment.)				Position / Occupation	Yrs/Mths There Yrs. Mths.
Note: You do not have to include information about income from alimony, child support or separate maintenance payments, unless you want us to consider this income in connection with this application for credit.				Source of Other Income	Annual Amount \$
Is any of your income nontaxable? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, how much?		
Checking Account	Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No	Savings Account	Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name and Address of Closest Relative Not Living At Your Address				Relationship	Home Phone ()
Are You a Permanent US Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No			(Do not complete if this is an application for individual, unsecured credit.)		
If No, What is the Current Expiration Date of your current Visa? _____			Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, and widowed)		

* If you are self-employed, on commission, or most of your income is from a source other than salary, please attach a copy of your last two years' federal tax returns.

Section C-Please Tell Us About Your Co-Applicant

First Name	Initial	Last Name	Date of Birth	Social Security No.	
Home Address (Other than P.O. Box)			City	State	Zip
Mailing Address (If different from home address)			City	State	Zip
Home Phone	Cellular Phone	Pager Phone	Fax Phone	<input type="checkbox"/> Home <input type="checkbox"/> Business	Internet Address
<input type="checkbox"/> Rent Own/Buying	<input type="checkbox"/> Live W/Others	Monthly Rent/Mortgage Payment \$	Landlord / Mortgagor		Yrs/Mths There Yrs. Mths.
Previous Address (if less than 2 years at above)			City	State	ZIP
Name and Address of Employer*			Position / Occupation	Yrs/Mths There Yrs. Mths.	Gross Annual Salary \$
Name and Address of Previous Employer* (if less than 2 years at current employment.)				Position / Occupation	Yrs/Mths There Yrs. Mths.
Note: You do not have to include information about income from alimony, child support or separate maintenance payments, unless you want us to consider this income in connection with this application for credit.				Source of Other Income	Annual Amount \$
Is any of your income nontaxable? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, how much?		
Checking Account	Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No	Savings Account	Bank	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name and Address of Closest Relative Not Living At Your Address				Relationship	Home Phone ()
Are You a Permanent US Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No			(Do not complete if this is an application for individual, unsecured credit.)		
If No, What is the Current Expiration Date of Visa? _____			Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, and widowed)		

* If you are self-employed, on commission, or most of your income is from a source other than salary, please attach a copy of your last two years' federal tax returns.

Be sure to complete the second page of this application

