

Galeana's Van Dyke Dodge Credit Application

Fax: (586) 573-4087 E-Mail: Finance@VanDykeDodge.com

* Applicant Name: _____

* Address: _____

* City: _____ * State: _____ * Zip: _____

* Home Phone #: _____

* Time at Residence: _____ years _____ months

* Own Buy Rent * Monthly Payment Amount: _____

* Date of Birth: _____ (mm/dd/yyyy)

If you have been at your current address less than 5 years, your previous address is also required.

Address: _____

City: _____ State: _____ Zip: _____

Time at Residence: _____ years _____ months

* Employers Name: _____

* Address: _____

* Occupation: _____

* Time on Job: _____ years _____ months

* Monthly Income: _____ Business Phone #: _____

If you have been at your current job less than 5 years, your previous job is also required.

Employers Name: _____

Occupation: _____

Time on Job: _____ years _____ months

Previous car financed/leased with: _____

Bank Name: _____

* Drivers License #: _____

* State: _____ * Expiration Date: _____ (mm/dd/yyyy)

* Signature: _____

By filling out and signing this application: I certify that I have provided true and accurate information in this form.

By Submitting this form, I authorize Galeana's Van Dyke Dodge the dealer to begin a credit investigation, to process my application and to forward my application to lenders, financial institutions or other third parties in order to process my application.

* = Required Field