



INFINITI  
FINANCIAL  
SERVICES

# Credit Application

**Signature**FINANCING®

**DEALER INFORMATION** **PLEASE USE BLACK INK**

DEALER NAME \_\_\_\_\_ DEALER NUMBER \_\_\_\_\_ **PROGRAM TYPE:** \_\_\_\_\_

**APPLICANT INFORMATION (MARRIED MAY APPLY AS AN INDIVIDUAL)**

<i>APPLICANT (PRINCIPAL DRIVER OF VEHICLE)</i>					<i>JOINT APPLICANT RELATIONSHIP</i>				
FULL NAME FIRST MI LAST				<input type="checkbox"/> SR <input type="checkbox"/> JR	FULL NAME FIRST MI LAST				<input type="checkbox"/> SR <input type="checkbox"/> JR
STREET ADDRESS			APT #	HOW LONG? YRS.   MOS.	STREET ADDRESS			APT #	HOW LONG? YRS.   MOS.
CITY	STATE	ZIP	HOME PHONE ( )		CITY	STATE	ZIP	HOME PHONE ( )	
DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER			DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER		
<input type="checkbox"/> OWN/BUYING		<input type="checkbox"/> LIVE WITH RELATIVE		MONTHLY PAYMENT	<input type="checkbox"/> OWN/BUYING		<input type="checkbox"/> LIVE WITH RELATIVE		MONTHLY PAYMENT
<input type="checkbox"/> RENT/LEASE		<input type="checkbox"/> OTHER _____		\$	<input type="checkbox"/> RENT/LEASE		<input type="checkbox"/> OTHER _____		\$

<b>EMPLOYMENT</b>									
EMPLOYER NAME			HOW LONG? YRS.   MOS.		EMPLOYER NAME			HOW LONG? YRS.   MOS.	
EMPLOYER ADDRESS									
POSITION/TITLE		WORK PHONE ( )	GROSS ANNUAL SALARY		POSITION/TITLE		WORK PHONE ( )	GROSS ANNUAL SALARY	
ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED, IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS DEBT. OTHER INCOME SOURCE			ANNUAL AMOUNT \$		ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED, IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS DEBT. OTHER INCOME SOURCE			ANNUAL AMOUNT \$	
PREVIOUS EMPLOYER OR SCHOOL			HOW LONG? YRS.   MOS.		PREVIOUS EMPLOYER OR SCHOOL			HOW LONG? YRS.   MOS.	

<b>REFERENCES</b>							
AUTO CREDIT REFERENCE (A/C #)		TRADING? YES   NO	BALANCE \$	AUTO CREDIT REFERENCE (A/C #)		TRADING? YES   NO	BALANCE \$
OTHER CREDIT REFERENCE			BALANCE \$	OTHER CREDIT REFERENCE			BALANCE \$
NEAREST RELATIVE (NOT LIVING WITH YOU)			RELATIONSHIP	NEAREST RELATIVE (NOT LIVING WITH YOU)			RELATIONSHIP
ADDRESS			PHONE ( )	ADDRESS			PHONE ( )
FRIEND OR RELATIVE			PHONE ( )	FRIEND OR RELATIVE			PHONE ( )

**SIGN**

NOTICE: I, THE UNDERSIGNED, HEREBY AUTHORIZE THE DEALER, INFINITI FINANCIAL SERVICES, NISSAN-INFINITI LT AND/OR \_\_\_\_\_ (COLLECTIVELY "PROSPECTIVE CREDITORS") TO VERIFY CREDIT AND EMPLOYMENT HISTORY AS STATED ABOVE AND TO ANSWER QUESTIONS ABOUT CREDIT EXPERIENCE WITH ME. IF THIS APPLICATION IS MADE PURSUANT TO ANY CREDIT PROGRAM FOR ATTENDEES AND/OR GRADUATES OF SCHOOLS OR EDUCATIONAL INSTITUTIONS, THEN PROSPECTIVE CREDITORS MAY VERIFY MY ELIGIBILITY FOR SUCH PROGRAM, INCLUDING BY INQUIRY TO MY SCHOOL(S) OR EDUCATIONAL INSTITUTION(S). INSURANCE RELATED TO THE CREDIT FOR WHICH I AM APPLYING MAY BE PURCHASED FROM AN INSURER OR AGENT OF MY CHOICE WHO MEETS PROSPECTIVE CREDITOR STANDARDS. IN CONNECTION WITH THIS APPLICATION FOR CREDIT, PROSPECTIVE CREDITORS MAY REQUEST A CONSUMER (CREDIT) REPORT. ON MY REQUEST, PROSPECTIVE CREDITORS WILL ADVISE ME IF THE REPORT WAS ACTUALLY ORDERED AND IF SO, THE NAME AND ADDRESS OF THE AGENCY THAT FURNISHED THE REPORT. PROSPECTIVE CREDITORS MAY ORDER SUBSEQUENT CONSUMER (CREDIT) REPORTS.

I AUTHORIZE PROSPECTIVE CREDITORS TO ASK MY PAST AND CURRENT CREDITORS ("CREDIT REFERENCES"), INCLUDING CREDITORS LISTED ABOVE OR ON MY CONSUMER (CREDIT) REPORT, ABOUT MY CREDIT PERFORMANCE WITH THEM. PROVISION BY PROSPECTIVE CREDITORS OF A COPY OF THIS AUTHORIZATION SHALL SERVE AS MY DIRECTION THAT MY CREDIT REFERENCES PROVIDE MY CREDIT PERFORMANCE INFORMATION.

EVERYTHING THAT I HAVE STATED IN THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT PROSPECTIVE CREDITORS WILL RETAIN THIS APPLICATION WHETHER OR NOT IT IS APPROVED. I WILL NOTIFY PROSPECTIVE CREDITORS, IF APPLICABLE, WITHIN A REASONABLE TIME OF ANY CHANGE IN MY NAME, ADDRESS OR EMPLOYMENT.

**CO-APPLICANT'S SIGNATURE MEANS YOU INTEND TO APPLY FOR JOINT CREDIT.**

X \_\_\_\_\_ X \_\_\_\_\_  
SIGNATURE OF APPLICANT DATE SIGNATURE OF JOINT APPLICANT DATE

**DEALER**

PROPOSED FINANCING TERMS				VEHICLE DESCRIPTION			
RETAIL		LEASE		VIN			
SALES PRICE	\$ _____	GROSS CAP	\$ _____	<input type="checkbox"/> NEW	USED VALUE GUIDE:		TRADE IN:
DOWN PAYMENT	\$ _____	REDUCTION	\$ _____	<input type="checkbox"/> USED	<input type="checkbox"/> NADA		
NET TRADE	\$ _____	ADJUSTED CAP	\$ _____	<input type="checkbox"/> DEMO	<input type="checkbox"/> KELLEY		
AMT FINANCED	\$ _____	MSRP	\$ _____	YEAR _____	<input type="checkbox"/> BLACK BOOK		YEAR _____
PROGRAM	_____	PROGRAM	_____	MAKE _____	BOOK VALUE \$ _____		MAKE _____
TERM	_____	PAYMENT _____	TERM _____	MODEL _____	MILEAGE _____		MODEL _____

*In states where leasing is available through Nissan-Infiniti LT, Infiniti Financial Services acts as Servicer for Nissan-Infiniti LT for lease applications.*

IFS 2007 5/05 Infiniti Financial Services is a division of Nissan Motor Acceptance Corporation



\*N-CPCREDAPPL\*