PEEL CHRYSLER CREDIT APPLICATION



212 Lakeshore Rd W, Mississauga, ON L5H 1G6 905 278 6181 or toll free 866 449 7335(PEEL)

A	PPLICANT PE	RSONAL INFORMATION			
FIRST NAME:	MIDDLE NAME:		LAST NAME:		
DATE OF BIRTH:	MARITAL STATUS (SELECT ONE):		EMAIL:		
MONTH DAY YEAR	SINGLE I	MARRIED COMMON LAW			
RESIDENTIAL INFORMATION: OWN RENT					
STREET ADDRESS INCLUDING SUITE # (IF APPLICABLE):		CITY:	PROVINCE	POSTAL CODE:	
TIME AT CURRENT ADDRESS:		HOME PHONE NUMBER:	MOBILE NUMBER:		
PREVIOUS ADDRESS (IF LESS THAN 2 YEARS AT	CURRENT ADDRES	SS):	•		
STREET ADDRESS INCLUDING SUITE # (IF APPLICABLE):		CITY:	PROVINCE:	POSTAL CODE:	
,	APPLICANT EN	/ //PLOYMENT INFORMATI	ON:	<u> </u>	
NAME OF CURRENT EMPLOYER:		PHONE NUMBER:	EXT:	HOW LONG:	
POSITION			-1	FULL OR PART TIME:	
EMPLOYMENT ADDRESS:		CITY:	PROVINCE:	POSTAL CODE:	
NAME OF PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS WITH CURRENT EMPLOYER):			LENGTH OF TIME AT PREVIOUS EMPLOYER:		
PREVIOUS EMPLOYER'S STREET ADDRESS:		CITY:	PROVINCE:	POSTAL CODE:	
FIN	ANCIAL INFO	RMATION AND OBLIGAT	IONS:	•	
ANNUAL GROSS INCOME (BEFORE TAX):	OTHER MONTI	OTHER MONTHLY INCOME:		OTHER MONTHLY INCOME SOURCE:	
MONTHLY RENT OR MORTGAGE PAYMENT:	OTHER MONTHLY OBLIGATION:		SOURCE OF OTHER MONTHLY OBLIGATION:		
CO SIGNOR AVAILABLE?	CO SIGNOR NAME:		CO SIGNOR PHONE NUMBER:		
CO SIGNOR CURRENT EMPLOYER	CO SIGNOR POSITION:		CO-SIGNOR GROSS ANNUAL INCOME (IF ANY):		
I/We, the undersigned, warrant the truth, com Peel Chrysler and it's authorized lenders to ob I CONSENT TO THE USE AND TRANSFER OF THE	tain a credit repor	t.	·	·	
SIGNATURE:	FULL NAME:	FULL NAME:		DATE:	

CO SIGNOR SIGNATURE: CO SIGNOR FULL NAME: DATE: