

PLEASE PRINT - INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

INSTRUCTIONS:

You may apply for credit in your name alone, whether or not you are married.
 (1) Please indicate whether you are applying individually, or With another person.
 (2) Indicate your marital status here only if:
 a) you, live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or
 b) this is a joint application, or c) this is an application for secured credit.
 MARRIED UNMARRIED SEPARATED
 (3) If you are applying for credit with another person, please complete all sections.

(4) If you are married and live in a community property state, or any property that will secure this credit is located within a community property state, please provide information about your spouse in the "Co-Applicant" section (even if this application is in your name alone).
 Will Applicant(s) be principal driver/operator? YES NO
 The vehicle being applied for will be used primarily for: (check one)
 Personal, family or household use. Business, commercial, or agricultural purposes, or you, are an organization or governmental entity.

APPLICANT INFORMATION

Last Name		First Name		Middle	Birthdate	Social Security No.	
Address (Residence)			City	State	Zip	How Long: ____ Yrs. ____ Mos.	Drivers License No.
Home Phone	Cell Phone	Mailing Address (if different from Home Address)			City	State	Zip
Residential Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Buying <input type="checkbox"/> Parents <input type="checkbox"/> Other						Monthly Rent/Mtg. Pmt. \$	
Previous Full Address (if less than 3 years)				How Long: ____ Yrs. ____ Mos.		E-Mail Address:	

EMPLOYMENT and INCOME INFORMATION: Note - Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered as a basis for repaying this obligation.

Employer Name / <input type="checkbox"/> Self-Employed	Monthly Income: \$	Length of Employment	Occupation
	Other Income: \$	____ Yrs. ____ Mos.	
	Source:		
Current Work Phone Number	Previous Employer Name (if less than 3 years)	Length of Employment	Occupation
		____ Yrs. ____ Mos.	

CO-APPLICANT INFORMATION - This Person is a : Spousal Joint Applicant Joint Applicant Co-signer/Guarantor Non-Applicant Spouse

Last Name		First Name		Middle	Birthdate	Social Security No.	
Address (If different than Applicant's)			City	State	Zip	How Long: ____ Yrs. ____ Mos.	Drivers License No.
Home Phone	Cell Phone	Mailing Address (if different from Home Address)			City	State	Zip
Residential Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Buying <input type="checkbox"/> Parents <input type="checkbox"/> Other						Monthly Rent/Mtg. Pmt. \$	
Previous Full Address (if less than 3 years)				How Long: ____ Yrs. ____ Mos.		E-Mail Address:	

EMPLOYMENT and INCOME INFORMATION: Note - Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered as a basis for repaying this obligation.

Employer Name / <input type="checkbox"/> Self-Employed	Monthly Income: \$	Length of Employment	Occupation
	Other Income: \$	____ Yrs. ____ Mos.	
	Source:		
Current Work Phone Number	Previous Employer Name (if less than 3 years)	Length of Employment	Occupation
		____ Yrs. ____ Mos.	

CREDIT and DEBT INFORMATION: If you are married and live in a community property state, or any property that will secure this credit is located in such, the Seller/Lessor and AHFC* will assume that all assets and income are community property and all debts are community obligation, unless you indicate otherwise on this application.

Bank Reference	Account No	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Type of Loan: <input type="checkbox"/> Mortgage <input type="checkbox"/> Auto	Payment: \$	Balance: \$
	Payment: \$	Balance: \$
Has any party to this application been the subject, or subject to bankruptcy proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain, if yes.		
Has any party to this application ever obtained credit under a different name? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, What name?		
Had a vehicle repossessed? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, explain:		

References

Nearest relative not living with you:			
Name	Address	Phone	Relationship to Applicant
List 2 additional references:			
Name	Address	Phone	Relationship to Applicant

Please read and sign below: By your signature below, you certify that you have completed this application to obtain credit, and that all information provided by you for this application is true, correct and complete. You understand and agree that this application and related credit information will be forwarded to AHFC* (or other financial institution if shown below), and AHFC* may be asked to buy the retail installment contract or lease involved in this transaction. You authorize AHFC* to communicate the reason(s) for action taken on this application to the Dealer named below. You authorize the Seller/Lessor, and AHFC* (collectively "We", "Us" and "Our") to make inquiries and obtain information about you as We deem appropriate for the purpose of evaluating this application, and for any update, renewal, or extension of the credit received, including obtaining credit reports, contacting your credit references and/or your employer, and contacting any person or department about your driving record. You also authorize Us to provide credit information about this transaction to others for the purpose of initiating, monitoring, and other purposes related to your account. You authorize Us to give a copy of this application to anyone who has agreed to pay debts incurred on the basis of this application. If you provided your e-mail address on this application, you agree that any communications and correspondence to you from any of the parties to this transaction may be effected by e-mail. You agree that if an account is created for you, all of the following will also apply: (a) AHFC may monitor and record telephone calls regarding your account to assure the quality of Our service or for other reasons; (b) you expressly consent to AHFC using prerecorded/artificial voice messages, text messages and/or automatic dialing equipment while servicing or collecting your account, as the law allows; (c) you agree that AHFC may take these actions using the telephone number(s) that you provide Us in this credit application, you provide to AHFC in the future, or it obtains from another source, even if the number is for a mobile telephone and/or Our using the number results in changes to you.

*AHFC means and includes American Honda Finance Corporation and Honda Lease Trust, **20800 Madrona Avenue, Torrance, CA 90503**

You are notified that your application may be submitted to (Name and Address required): _____

Applicant's Signature _____ Date _____ Co-Applicant's Signature _____ Date _____

DEALER SECTION

Dealer Name		Dealer #		Dealer Contact Person;			
Honda/Acura Customer: <input type="checkbox"/> Yes <input type="checkbox"/> No	Year	Make		Model #		MSRP	
AHFC* Customer: <input type="checkbox"/> Yes <input type="checkbox"/> No							
Loyalty: <input type="checkbox"/> Yes <input type="checkbox"/> No	Term:	Invoice	Estimated Payments		Gap. Cost Red.	Adj. Cap. Cost	
			\$				
Sales Program:	<input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Certified	Cash Price:	Sales Tax:	Cash Down:	Trade-in Amount	Amount Financed	
	Miles:						