



## **Signature**BUSINESS®

## **Business Credit Application**

			PLEASE	USE BLACK INK	a la	PROGRA	M TYPE:	Retail
NOTICE TO OHIO APPLICANTS, THE OF	IIO LANAIG A CAINIOT DIOC	DEALER NUMB	ER	DEALER CONT	TACT	_	[	Leans TRAC
NOTICE TO OHIO APPLICANTS: THE OF AGENCIES MAINTAIN SEPARATE CRED	IT HISTORIES ON EACH	RIMINATION REQUI NDIVIDUAL UPON I	RETHAT ALL CRED REQUEST. THE OHI	ITORS MAKE CREDIT E O CIVIL RIGHTS COMI	QUALLY AVAILABLE	TO ALL CREDIT WO	RTHY CUSTOMER	RS, AND THAT CREDIT REPORT
BUSINESS INFORMATION  Corporation C LLC	□ Non-Profit	Tax ID Numl			AND THE PARTY OF T	Wall State of	VIIII IIIIO LAVV.	
S Trust Legal Business Name	Tax ID IVUIII	Type of Business			Website Address Year-End PBT \$			
Physical Address			City	Type of Business		Date Bus		ancial Statement Type*
Billing Address (if other than above)					State	Zip Code	Phone ( )	
		City		State	Zip Code	Phone (	3	
Garage Address (if other than above)			Primary Driver Na	ame		Phone ( )		
State of Organization	Email Address			Trade Name/DBA/Pa	rent Company		Phone ( )	
Principal Name (1)		Address				Title		% Ownership
Principal Name (2)	Address				Title		% Ownership	
Principal Name (3)	Address				Title		% Ownership	
If more than three Principals, Please attach separate sheet listing i Vehicle Fleet Management Contact		information. Title			Phone		Email	
Address (including city, state, zip)		( )						
Bank and Auto Financing or Ot	her Credit Sources							
Financial Institution	Address		Acct. No.	Unpaid Balance	9	Contact		Phone
GUARANTOR OR SOLE PROPR	IETORSHIP							
Individual (First Name, Middle Initial, Last  Present Address: (Number and Street)				Social Security No	).		Date of Birth	
Home Phone				City		State		Zip Code
( )	Own/Buying Rent/Lease		Living with Relative Other	e	Lived There Yrs	Mos.	Driver's License N	No. & State
Alternate Phone (Cell, Pager)	Employer Name & Addi					Main Business #		Time on Job Yrs, Mos.
Previous Employer/Business (if less than ( )	2 years) Employer	Name & Address				Phone Number	7	Time on Job Yrs. Mos.
Monthly Income	Secondary Income		Source	Alimony, child supp	ort or separate mainter	nance income need not	De revealed	ss Monthly Income from Busines
\$   \$ Mortgage Holder/Landlord (Name & Address)			Contact		have it considered as a basis for repaying this  Monthly Payment		s obligation. \$	Phone
Bank Name and Address			\$ Checking Account #			( ) Phone		
Nearest Relative (Not living with you)			Relationship		Savings Account #			( ) Phone
Personal Reference			Relationship		Address			( ) Phone
Personal Reference			·			Address		
Personal Reference				Address			Phone ( )	
SIGNATURE		, add ob						( )
NOTICE: I, THE UNDERSIGNED,  ABOUT CREDIT EXPERIENCE WITH M THEN PROSPECTIVE CREDITORS MA CREDIT FOR WHICH I AM APPLYING APPLICATION FOR CREDIT, PROSPEGAND IF SO, THE NAME AND ADDRES. I AUTHORIZE PROSPECTIVE CREDIT CREDIT PERFORMANCE WITH THEM SHALL BE A CONTINUING AUTHORIZE SERVE AS MY DIRECTION THAT MY CO EVERYTHING THAT I HAVE STATED IT PROSPECTIVE CREDITORS. I UNDER APPLICABLE, WITHIN A REASONABLI TO THE EXTENT PERMITTED BY LAW PHONE NUMBERS AND ANY PHONE AN ARTIFICIAL OR PRE-RECORDED V Company:  By (signature):	IE. IF THIS APPLICATION IY VERIFY MY ELIGIBILITY IF MAY BE PURCHASED TIVE CREDITORS MAY SOF THE AGENCY THAT ORS TO ASK MY PAST AND TO DISCLOSE TO ATION FOR ALL PRESED IN THIS APPLICATION IS STAND THAT PROSPECE TIME OF ANY CHANG I, I CONSENT THAT YOU NUMBERS LISTED ON OICE.	INSECT PROSPEC ITS MADE PURSUA, TY FOR SUCH PRO DEFROM AN INSU REQUEST A CREI AND CURRENT COTHER PERSON AND FUTURE R ROVIDE MY CRED TIVE CREDITORS E IN MY NAME, AL J., YOUR ASSIGNE THIS DOCUMENT,	ANT TO ANY CRED OGRAM, INCLUDIN RER OR AGENT DIT REPORT. ON N E REPORT. PROSI REDITORS (*CREI S, INCLUDING CR IEQUESTS AND IT PERFORMANCE CORRECT TO TH S WILL RETAIN TH DORESS OR EMPL IES, AND YOUR AG BY ANY MEANS Y	I, 10 VERIFY CREDIT DIT PROGRAM FOR A' NG BY INQUIRY TO NO OF MY CHOICE WH- MY REQUEST, PROSP PECTIVE CREDITORS DIT REFERENCES"), I EDIT REPORTING AC SCLOSURES, PROVIE E INFORMATION. HE BEST OF MY KNO IS APPLICATION WHO OYMENT.	AND EMPLOYMEN TTENDEES AND/OI MY SCHOOL(S) OR MY SCHOOL(S) OR MO MEETS PROSP PECTIVE CREDITOR MAY ORDER SUB: NCLUDING CREDITOR MEDICAL SUB: MOLUDING CREDITOR MOLUDING AND COLOR MOLUDING AND AUTOMAT	IT HISTORY AS ST. R GRADUATES OF EDUCATIONAL IN: ECTIVE CREDITOR SO WILL ADVISE MI SEQUENT CREDIT TORS LISTED ABCO ATION ABOUT MY CTIVE CREDITORS ONSTITUTES MY EI IS APPROVED. I	ATED ABOVE AN SCHOOLS OR E STITUTION(S). IN STITUTION(S). IN STANDARDS. II E IF THE REPORTS.  IVE OR ON MY (ACCOUNTS AND OF A COPY OF TO THE APPLICAT WILL NOTIFY PROCESSED AND ACCOUNTS AND OF A COPY OF TO THE APPLICAT WILL NOTIFY PROCESSED AND ACCOUNTS	ID TO ANSWER QUESTION DUCATIONAL INSTITUTIONS ISURANCE RELATED TO THIN CONNECTION WITH THIN TWAS ACTUALLY ORDERED CREDIT REPORT, ABOUT MID CREDIT EXPERIENCE. THIS AUTHORIZATION SHALL ION FOR CREDIT WITH THE ROSPECTIVE CREDITORS, IN THE AUTHORIZATIONS, IN THE AUTHORIZATIONS.
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DEALER PRO	POSED FINANCING	TERMS SINGLE	UNIT			VFHICE	E DESCRIPTIO	N
RETAIL SALES PRICE \$		GROSS CAP	NET LEASE		VIN:	VERICE	L DESCRIPTIO	14
DOWN PAYMENT \$		REDUCTION	\$		NEW	INVOICE \$		TRADE IN:
NET TRADE \$		ADJUSTED CAP	\$		USED VA	LUE GUIDE:		
AMOUNT FINANCED \$		MSRP	\$		DEMO U	SED VALUE \$		
PROGRAM		PROGRAM			YEAR			YEAR
ERM		PAYMENT \$	TER	M	MAKE			MAKE
TRAC LEASE		ΛινιΣινι ψ	ILK		MODEL			MODEL
GROSS CAP \$					CREDIT LINE REC	QUEST		
REDUCTION \$		LINE REQUE		\$	. All line requests over \$250,000 require 2 previous year-end CPA reviewed/audited financial statements or accountant			
DJUSTED CAP \$		# OF VEHICLES IN FLEET			CPA reviewed/audited financial statements or accountant prepared tax returns and current YTD interim statements.			
ERM		IN ATTE	MAIN IPPE	10.15				
RESIDUAL %		CORPORAT	ION ACTS AS S	ERVICER FOR NIS	SAN-INFINITI LT	FOR LEASE AF	T, NISSAN MO	OTOR ACCEPTANCE INFINITI FINANCIAL
AYMENT \$		SERVICES I	S A DIVISION O	F NISSAN MOTOR	R ACCEPTANCE	CORPORATION.		
ONEY FACTOR		*Indicate whi	ch of the follow	ring is applicable				

MMAC 2008 1/09

Prepared, CPA Reviewed, CPA Audited, CPA Unaudited, Tax Return, 10K or 10Q.

\*N-CPCREDAPPL\*