



Credit Application for: Retail	Lease	☐ Balloon
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PLEASE PRINT — INCO	MPLETE APPLICATIONS V	WILL NO	OT 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					(4) If you are applying for credit with another person, please complete all sections.(5) 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).								
b) this is a joint application, or c) this is an application for secured credit. ☐ MARRIED ☐ UNMARRIED ☐ SEPARATED					Will Applicant(s) be principal driver/operator? ☐ YES ☐ NO.								
(3) We intend to apply for joint credit				The vehicle being applied for will be used primarily for: (check one) Personal, family or household use. Business, commercial, or agricultural								ricultural	
Applicant Initials Co-Applicant Initials					purposes, or you are an organization or governmental entity.								
APPLICANT INFORMATION Last Name First Name Middle Birthdate Social Security No.													
Last Name			Middle	ddle		Birthdate		Social Security No.					
Address (Residence)			City	St	State Zip How LongYr				Drivers License No.				
Home Phone	Cell Phone	Mailing	g Address (if different fro	om Home /	Address)		,	City			State	Zip	
Residential Status: 🔲 Owr	n 🗌 Rent 🔲 Buying 🔲 Pa	arents [Other					Monthly R	ent/Mtg	. Pmt. \$	\$		
Previous Full Address (if les	s than 3 years)				How Long:		_ Mos.	E-Mail Address:					
EMPLOYMENT and INCOME INFO	DRMATION: Note - Alimony, child s	upport, or	separate maintenance inco	me need no	be revealed if	you do n	ot choose to	have it consid	lered as a	basis fo	or repaying	this obligation.	
Employer Name / Self-Employed			Monthly Income: \$ Other Income: \$			Lenç	Length of Employment			Occupation			
		8	Source:			Yrs		Mos.					
Current Work Phone Number			Previous Employer Name (If less than 3 years)			Lenç	Length of Employment Occupation						
							Yrs	Mos.					
CO-APPLICANT INFO	DRMATION - This Person is a	ı: Sp	pousal Joint Applicant	Joint A	pplicant	Co-sig	ner/Guaraı	ntor Nor	1-Applic	ant Sp	ouse		
CO-APPLICANT INFO	DRMATION - This Person is a First Name	ı: 🔲 Sp		Joint A	Applicant	Co-sig	ner/Guarai Birthdate			ant Spo			
	First Name	ı: Sp		Middle	ate Zip	Co-sig	Birthdate	ng:		l Secur		No.	
Last Name	First Name		ı	Middle St	ate Zip	Co-sig	Birthdate	ng:	Socia	l Secur	ity No.	No.	
Last Name Address (If different than Ap Home Phone	First Name	Mailing	City g Address (if different fro	Middle St	ate Zip	Co-sig	Birthdate	ng: Yrs	Socia Mos.	l Secur Driver	s License		
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SEE IMPORTANT INFORMATION ON THE FOLLOWING PAGE

Applicant's Initials: _____/ Co-Applicant's Initials: _____ Page 1 of 2 AFSCRDTAPP 12/15

			Refe	erences					
Nearest relative not living with you:									
Name	Address				Phone		Relationship to Applicant		
List 2 additional references:							I		
Name	Address				Phone		Relationship to Applicant		
Please read and sign below: By your signatur true, correct and complete. You understand armay be asked to buy the retail installment of investigation (including the information contains the Dealer to receive copies of such reports at the Seller/ Lessor, AHFC* and any affiliate, ag appropriate, including obtaining credit report department about your driving record. You als and for other legally permissible purposes. Yo your e-mail address on this application, you a if an account is created for you, all of the folic reasons; (b) you expressly consent to AHFC* the law allows; (c) you agree that AHFC* may from another source, even if the number is fo *AHFC means and includes American Honda F	Id agree that to intract or least ned in this ap and investigation ent, service ps, contacting to authorize Us a uthorize Us a uthorize Us authorize Us yield a using pree that any wing will also using preeco take these ac r a mobile tele cinance Corpo	this application be involved in polication with polication with ons to: (1) assisticted as to provider or assisty our credit rest to provide crest to give a copcommunication apply: (a) AHI orded/artificial tions using the phone and/or ration and Horardiant in the provided in the provided and the provided and the provided in the provided and the provided in the provided in the provided and the provided in the pr	n and related credithis transaction. You the Dealer named st you in a loan/ext gnee of AHFC* (co) eferences and/or yedit information aboy of this application ons and corresponder may monitor a voice messages, the telephone number Our using the number our using the number of the second sec	information will be to authorize AHFC* to below and any othe ension of credit and lectively "We", "Us" our employer, investout this transaction to to anyone who has dence to you from an and record telephone ext messages and/or (s) that you provide their results in chargonal authorized to the control of th	forwarded to AHFC or share the results or person assisting (2) search for finar and "Our") to making attention of the purity agreed to pay deby of the parties to calls regarding your automatic dialing Us in this credit also be a so to you.	* (or other financial s of any credit repor you in obtaining an ncing with third part te inquiries and obta t and employment rpose of initiating, n ts incurred on the b this transaction may ur account to assure equipment while s pplication, you provi	institution if shown below), and Art, credit investigation, or employ extension of credit. You also auth y lenders on your behalf. You auth ain information about you as We history, and contacting any personitoring, and servicing your accasis of this application. If you proy be effected by e-mail. You agree the quality of Our service or for ervicing or collecting your account.	AHFC' ymen thorize thorize deem son or count ovidec ee tha r other unt, as	
Applicant's Signature		Date Co-Applicant's			gnature		Date:	Date:	
			DEALE	R SECTION					
Dealer Name		Dealer #:			Contact Person:				
Acura Customer: Yes No AHFC* Customer: Yes No	Year Make			Model	#		MSRP		
Loyalty:	Term:		Income	Estima	ted Payments	Cap. Cost Red.	Adj. Cap. Cost		
☐ Yes ☐ No				S					

STATE NOTICES

Sales Tax:

Cash Down:

Trade-In Amount

Amount Financed

Cash Price:

California Residents: If married you may apply for a separate account.

☐ New ☐ Used ☐ Certified

Miles:

Sales Program:

Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Maine Residents: If your application is approved and credit is granted, you will be required to insure the vehicle against loss or damage. If this application is for a lease, you will also be required to have liability insurance. You may place this insurance through the agent or broker of your choice, whether or not such agent or broker is affiliated with the dealer or holder of your contract. Obtaining insurance from a particular agent or broker will not affect the credit decision unless the insurance product selected violates the terms of your contract.

Married **Wisconsin** Residents: No agreement, unilateral statement or court decree relating to marital property adversely affects a creditor's interest unless prior to the time credit is granted the creditor is furnished a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision. If the credit for which you are applying is granted, your spouse will also receive notification that credit has been extended to you.

New York, Rhode Island and **Vermont** Residents: Consumer reports (credit reports) may be obtained in connection with this application. If you request: 1) You will be informed whether or not consumer reports were obtained; and 2) If consumer reports were obtained, you will be informed of the names and addresses of the consumer reporting agencies (credit bureaus) that furnished the reports. If this application for credit is approved, you authorize AHFC* to request and use subsequent consumer reports in connection with (a) renewals or extensions of this credit; (b) reviewing your credit; (c) for the purpose of taking collection action on this extension of credit; or (d) other legitimate reasons associated with this extension of credit.

GENERAL NOTICE FOR LEASE TRANSACTIONS

Notice is hereby given that Honda Lease Trust has assigned all of its rights (but not its obligations) to purchase and/or sell this vehicle to Honda Finance Exchange, Inc. pursuant to the Sub-Servicing and Master Exchange Agreement. Notice for New York and Virginia Residents: The Trust designation is HVT, Inc., as Trustee for Honda Lease Trust.

NOTICE OF MAILING OF PRIVACY NOTICES

PRIVACY NOTICE: AHFC Privacy Notice will be mailed to the applicant at the address provided in this credit application five to ten days after funding. The Privacy Notice is also available at http://www.acurafinancialservices.com/account-management/printable-forms.

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