## CHECK Appropriate box SELLER: VAN NUYS CHRYSLER DODGE JEEP RAM (818) 787-0800 SECTION A. INFORMATION REGARDING APPLICANT FIRST NAME INITIAL BIRTHDATE DRIVERS LIC NO LAST NAME (PRINT) SOCIAL SECURITY NO. AGE OF DEPENDENTS ADDRESS CITY STATE ZIP HOME PHONE HOW LONG YRS. MOS. PREVIOUS ADDRESSES (TO COVER5 YEARS RESIDENCE CITY STATE ZIP HOME PHONE HOW LONG? YRS.\_\_MOS.\_\_ OCCUPATION OR RANK PRESENT EMPLOYER ADDRESS PHONE CITY STATE ZIP PREVIOUS WMPLOYMENT (TO COVER 5 YEAR HISTORY) ADDRESS CITY STATE PHONE HOW LONG? ZIP YRS. MOS. NEAREST RELATIVE NOT LIVING WITH APPLICANT ADDRESS CITY STATE ZIP PHONE HOW LONG? YRS. MOS.

## INCOME:

Applicants gross monthly income from employment
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 obligation.
Alimony, child support, separate maintenance received under: Court order Written Agreement Verbal Understanding Amount \$

Amount of other monthly income and source(s) ......\$\_\_\_\_\_

## SECTION B. Information Regarding Co-Applicant or Spouse(for community property states)(Use separate sheets if necessary)

LAST NAME (PRINT)	FIRST	INITIAL	BI	RTHDATE	E DRIVE	RS LIC NO	).				
SOCIAL SECURITY NO.			RELATIO	ONSHIP T	FO APPLI	CANT	AGE OF D	EPENDE	ENTS		
ADDRESS	CITY	STATE	=	ZIP	PHC	NE		HOW L	ONG?		
					( )			YRS	MOS	-	
PREVIOUS ADDRESS (TO	COVER 5YEARS RE	SIDENCE) CITY	STATE	ZIP	)		HOW L	ONG?	LIVE	D IN CON	/MUNITY?
							YRS.	_ MOS		YRS	MOS
		CITY	STATE	ZIP			HOW LO	DNG?	LIVED II	N COMM	UNITY?
							YRS	M	os	YRS_	MOS
OCCUPATIN OR RANK	PRESENT E	MPLYER	ADDRESS	CITY	STATE	ZIP	PHONE			HOW LO	NG?
PREVIOUS EMPLOYMEN	NT (TO COVER 5YEA	R HISTORY)	ADDRESS	CITY	STATE	ZIP	PHONG			НС	OW LONG?
	ADDRESS	CITY	STATE	Z	ZIP	PHONE		HOW	LONG?		
NEAREST RELATIVE NO	T LIVING WITH APP	LICANT ADDR	ESS	CITY		STATE	ZIP	PHO	NE	RI	ELATIONSHIP

INCOME:

Joint Applicant's gross monthly income from employment			\$
Alimony, child support or separate maintenance income need not be revea	aled if you do not wish	to have it considered as	a basis for repaying
this obligation.			
Alimony, child support, separate maintenance received under: Court order	Written Agreement	Verbal Understanding	Amount S

Amount of other monthly income and source(s)	 	\$

**SECTION C. ASSET and DEBT Information:** List all Debts Including Alimony, Child Support, Separate maintenance (Use a Separate Page If Necessary) (If Section B has been completed, this Section should be completed giving information about both the Applicant and joint Applicant or Spouse (for community property states). Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

IOLDER ADDRES	SS A	CCOUNT NO	MORTGAGE E	BALANCE	PYMNT. OR RENT	
			\$		\$	
AGE OF HOME	PRICE PAID FOR HOME	MARKET VALUE	2 <sup>ND</sup> MORTGA	GE AMOUNT	PAYMENT	
		\$	\$		\$	
AME OF ALL OBLIGATI	ONS ACCOUNT NUMBER	ADDRESS CITY STATE ZI	P BALANCE HIGH	MONTHLY PY	MNTS OR DATE CLOSED	
	OPEN/CLOSE	D	\$\$	\$		
	OPEN/CLOSE	)	\$\$	\$		
	OPEN/CLOSEI	)	\$\$	\$		
	OPEN/CLOSE	D	\$\$	\$		
ED BY/LEASED BY	ACCOUNT NUMBER	ADDRESS CITY ST	ATE ZIP MON	NTHLY PYMNTS	OR DATE CLOSED	
				\$		
				\$		
ACCOUNT NUMBER	R BRANCH/AD	DRESS			BALANCE	
			CHECKING/SAVI	NGS \$		
			CHECKING/SAVI	NGS \$		
HAVE YOU EVER HAD ANY PROPERTY REPOSSESED? YES/NO DO YOU HAVE ANY LAW SUITS PENDING AGAINST YOU? YES/NO						
KRUPTCY OR IS A BA	NKRUPTCY PROCEEDING	IN PROGRESS OR EXPL	ECTED? YES/I	OV		
NO ACTIVE/IN	IACTIVE					
N OVER ONE YEAR	ADDRESS CI	TY STATE ZIP		PHONE		
				( )		
				( )		
SH TO APPLY FO	R VEHICLE INSURAN	CE IN CONNECTIO	N WITH THIS C	REDIT APPLI	CATION,	
WING:						
NOTICE: NO PERSON IS REQUIRED AS A CONDITION PURSUANT TO FINANCING THE PURHCASE INSURNACE THROUGH A PARTICILAR INSURANCE						
OR AGENT (NAME A	ND ADDRESS)	PHONE WH	ERE WILL THE VEH	IICLE BE GARA	GED POLICY NO.	
		)				
R BEEN CANCELED B	Y ANY COMPANY? YES	/NO				
			-			
SSES IN THE PAST 5	YEARS			I O I AL AIVIOUN	IT OF LOSSES	
	AME OF ALL OBLIGATI	AME OF ALL OBLIGATIONS ACCOUNT NUMBER OPEN/CLOSE OPE	\$ AME OF ALL OBLIGATIONS ACCOUNT NUMBER ADDRESS CITY STATE ZI OPEN/CLOSED OPEN/CLOSED OPEN/CLOSED OPEN/CLOSED OPEN/CLOSED TED BY/LEASED BY ACCOUNT NUMBER ADDRESS CITY ST ACCOUNT NUMBER BRANCH/ADDRESS PROPERTY REPOSSESED? YES/NO DO YOU HAVE ANY LAW KRUPTCY OR IS A BANKRUPTCY PROCEEDING IN PROGRESS OR EXPINO ACTIVE/INACTIVE NO ACTIVE/INACTIVE NO ACTIVE/INACTIVE NO ACTIVE/INACTIVE SH TO APPLY FOR VEHICLE INSURANCE IN CONNECTION WING: EQUIRED AS A CONDITION PURSUANT TO FINANCING THE PURHCAS COMPANY, AGENT OR BROKER.	AGE OF HOME       PRICE PAID FOR HOME       MARKET VALUE       2 <sup>ND</sup> MORTGAN         \$       \$       \$       \$         AME OF ALL OBLIGATIONS       ACCOUNT NUMBER       ADDRESS CITY STATE ZIP       BALANCE       HIGH         OPEN/CLOSED       \$       <	AGE OF HOME       PRICE PAID FOR HOME       MARKET VALUE       2 <sup>ND</sup> MORTGAGE AMOUNT         \$       \$       \$       \$         AME OF ALL OBLIGATIONS       ACCOUNT NUMBER       ADDRESS CITY STATE ZIP       BALANCE       HIGH       MONTHLY PY         OPEN/CLOSED       \$       \$       \$       \$       \$         OPEN/CLOSED       \$       \$       \$       \$       \$         OPEN/CLOSED       \$       \$       \$       \$       \$         OPEN/CLOSED       \$	

You agree that we and any assignee of the financing contact or lease may monitor and record telephone calls regarding your account to assure the quality of our service or for other reasons. You agree that we and our assignees may try to contact you in writing, by e-mail, or using prerecorded/artificial voice messages, text messages, and automatic telephone dialing systems, as the law allows. You also agree that we and our assignees may try to contact you in these and other ways at any address or telephone number you provide us, even if the telephone number is a cell phone number or the contact results in a charge to you. You (1) make the above representations, which are certified correct, for the purpose of securing credit; (2) authorize us, affiliated entities, and financial institutions to whom we submit your application ( hereinafter "Financial Institutions") to obtain consumer credit reports and to gather employment history as necessary and appropriate to determine your

creditworthiness; (3) understand that we or the Financial Institutions will retain this application whether or not it is approved, and that is your responsibility to update changed of name, address, or employment.

## PURCHASER HEREBY ACKNOWLEDGES RECEIPT OF A COPY OF THIS CREDIT APPLICATION

Χ	APPLICANT'S SIGNITURE
$\wedge$	CO-APPLICATE'S SIGNATURE

IF MARRIED YOU MAY APPLY FOR CREDIT SEOARATELY AS AN INDIVIDUAL.

<u>COMMUNITY PROPERTY NOTICED FOR MARRIED APPLICANTS:</u> PLEASE PROVIDE INFORMATION ABOUT YOUR SPOUSE REQUESTED IN SECTION B, EVEN IF YOUR SPOUSE IS NOT A CO-APPLICANT. YOUR SPOUSE DOES NOT HAVE TO BE A CO-APPLICANT UNLESS HE/SHE WANTS TO BE A CO-APPLICANT.