

MOTOR VEHICLE SECURED CREDIT APPLICATION

IMPORTANT: Read these directions before completing this Application.

- Check If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested.
- Appropriate Box **If you are applying for joint credit with another person, each person must complete a separate copy of this application.**

Applicant's Signature _____

Co-Applicant's Signature _____

- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested.

SECTION A – PERSONAL & EMPLOYMENT INFORMATION

Full Name: _____ **Birthdate:** _____
Last First Middle

Present Street Address: _____ **City:** _____

State: _____ **Zip:** _____ **Since:** _____ **Social Security No.:** _____
Mo Yr

Phone #: (____) _____ **Cell #:** (____) _____ **Email:** _____

Previous Street Address: _____ **City:** _____

State: _____ **Zip:** _____ **From:** _____ **To:** _____
Mo Yr Mo Yr

Driver's License No.: _____ **State Issued:** _____ **No. Dependents (excluding self):** _____ **Ages:** _____

Landlord/Mortgage Holder: _____ **Telephone:** (____) _____ - _____

Landlord/Mortgage Holder Address: _____

Present Employer: _____ **Since:** _____ **Position/Title/Rank:** _____
Name Mo Yr

Present Employer Address: _____
Street City State

Phone #: (____) _____ **Name & title of supervisor:** _____

Present Employment Income: (Please provide a current paystub, or LES if military, with this application.)

If Civilian: Hourly Rate \$ _____ No. of Average Weekly Hrs Worked: _____ **OR** If salaried employee, Monthly Gross Pay \$ _____

If Military: Base Pay \$ _____ BAH: \$ _____ BAS: \$ _____ All Other Allowances: \$ _____

Previous Employer: _____ **From:** _____ **To:** _____
Name City State Mo Yr Mo Yr

2nd Previous Employer: _____ **From:** _____ **To:** _____
Name City State Mo Yr Mo Yr

Additional Sources of Income. NOTE: 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 oral understanding

Other income: \$ _____ per _____ Source(s) of other income: _____

Is any income listed directly above likely to be reduced before the credit requested is paid off? Yes (Explain in detail on a separate sheet.) No

Checking Account No.: _____ Institution and Branch: _____

SECTION B – ASSET AND DEBT INFORMATION

ASSETS OWNED (use separate sheet if necessary).

Description of Assets	Value	Subject to Debt? Yes/No	Name(s) of Owner(s)
	\$		

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary.)

Creditor	Type of Debt or Account No.	Name in Which Acct. Carried	Original Debt	Present Balance	Monthly Payments	Past Due? Yes/No
1. Landlord or Mortgage Holder)	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$	\$	\$	
2.						
3.						
Total Debts			\$	\$	\$	

Have you been declared bankrupt in the last 14 years? No Yes Year _____ Where? _____

Other Obligations – (E.g., liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)

SECTION C – SECURED CREDIT. Any credit I obtain will be secured by the motor vehicle I purchase.

Names and addresses of all persons who will be co-owners of the motor vehicle I purchase (use separate sheet if necessary):

Name: _____ Address: _____

NOTE: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. WHAT THIS MEANS FOR YOU: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Everything that I have stated in this application is correct to the best of my knowledge. I understand that the motor vehicle dealer, Automotive Services Finance, Inc., P.O. Box 4039, Virginia Beach, VA 23454 ("ASF"), and/or any other indirect financing source to whom dealer may offer the opportunity to purchase and be assigned a retail installment sale contract ("contract") I may enter, will retain this application whether or not it is approved. The motor vehicle dealer, ASF and/or any other potential assignee of a contract I may enter, if I am offered credit, are authorized (1) to check my credit (which may include obtaining my consumer credit reports), residence and employment histories, both now and in servicing the contract, and (2) to answer questions about the motor vehicle dealer's, ASF's and/or any other potential assignee's credit experience with me.

Signature _____

Date _____

Check appropriate box: Applicant Co-Applicant