



Southeast Toyota Finance

STANDARD CREDIT APPLICATION

Before completing this form please read the directions carefully. (Check appropriate box). Applicant, if married, may apply for a separate account.

- If you are applying for individual credit in your own name and relying on your own income or assets and not the income or assets of another person as a basis for the repayment of the credit requested, complete only **Section A**.
- If you are applying for joint credit with another person, sign where indicated and complete **Sections A and B**.
- If you are married and live in a community property state, please complete **Section A** about yourself and **Section B** about your spouse. You must sign this application. Your spouse must sign this application only if he/she wishes to be a co-applicant.
- If you are applying for business credit complete **Section A**. If you are applying for business credit with a co-applicant, complete **Sections A and B**.

FIRST NAME OR BUSINESS NAME	MIDDLE	LAST	SR JR	SOCIAL SECURITY NO. OR (TAX ID #)	DATE OF BIRTH MO. DAY YR.	PHONE ()
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E-MAIL ADDRESS _____

**-A-
APPLICANT'S
CREDIT INFORMATION**

PRESENT ADDRESS	NUMBER AND STREET	CITY	COUNTY	STATE	ZIP	LIVED THERE YEARS MONTHS
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RENT BY MO. LIVE WITH RELATIVES OWN <input type="checkbox"/>	LANDLORD OR MORTGAGE HOLDER NAME	MO. PAYMENT OR RENT \$
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PREVIOUS HOME ADDRESS (IF LESS THAN 2 YEARS AT PRESENT ADDRESS)	NUMBER AND STREET	CITY	COUNTY	STATE	ZIP	LIVED THERE YEARS MONTHS
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EMPLOYED BY SELF <input type="checkbox"/> OTHERS <input type="checkbox"/>	NAME	BUSINESS ADDRESS, NUMBER AND STREET	CITY	STATE	HOW LONG YEARS MONTHS	BUS. PHONE NO. ()
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TRADE OR OCCUPATION	GROSS SALARY OR WAGES \$ <input type="checkbox"/> WK <input type="checkbox"/> MO <input type="checkbox"/> YR	NAME OF PREVIOUS EMPLOYER	ADDRESS	NO. YEARS
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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.

TYPE OF OTHER INCOME	SOURCE	GROSS AMOUNT \$	<input type="checkbox"/> WEEK <input type="checkbox"/> MONTH <input type="checkbox"/> YEAR
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NAME OF CREDITOR OF LAST CAR FINANCED	PHONE NO.	ACCOUNT NO.
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NAME AND ADDRESS OF PARENTS OR NEAREST RELATIVE NOT LIVING WITH ME	NAME	ADDRESS	PHONE NO.	RELATIONSHIP
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RELATIONSHIP TO APPLICANT (IF ANY) _____

FIRST NAME	MIDDLE	LAST	SR JR	SOCIAL SECURITY NO.	DATE OF BIRTH MO. DAY YR.	PHONE ()
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E-MAIL ADDRESS _____

**-B-
THE OTHER PARTY'S
CREDIT INFORMATION**

PRESENT ADDRESS	NUMBER AND STREET	CITY	COUNTY	STATE	ZIP	LIVED THERE YEARS MONTHS
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RENT BY MO. LIVE WITH RELATIVES OWN <input type="checkbox"/>	LANDLORD OR MORTGAGE HOLDER NAME	MO. PAYMENT OR RENT \$
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PREVIOUS HOME ADDRESS (IF LESS THAN 2 YEARS AT PRESENT ADDRESS)	NUMBER AND STREET	CITY	COUNTY	STATE	ZIP	LIVED THERE YEARS MONTHS
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EMPLOYED BY SELF <input type="checkbox"/> OTHERS <input type="checkbox"/>	NAME	BUSINESS ADDRESS, NUMBER AND STREET	CITY	STATE	HOW LONG YEARS MONTHS	BUS. PHONE NO. ()
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TRADE OR OCCUPATION	GROSS SALARY OR WAGES \$ <input type="checkbox"/> WK <input type="checkbox"/> MO <input type="checkbox"/> YR	NAME OF PREVIOUS EMPLOYER	ADDRESS	NO. YEARS
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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.

TYPE OF OTHER INCOME	SOURCE	GROSS MONTHLY AMOUNT \$	
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<input type="checkbox"/> NEW	VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE TRIM
<input type="checkbox"/> USED				
<input type="checkbox"/> CERTIFIED	INVOICE/WHOLESALE/MSRP		TERM	MONTHLY PAYMENT
<input type="checkbox"/> OTHER				ODOMETER MILEAGE
CASH PRICE (1)	NET TRADE (2)	CASH DOWN AND/OR REBATES (3)	UNPAID BALANCE (1 - 2 - 3)	AMOUNT FINANCED

VEHICLE INSURANCE is required for the full term of the Contract, at your expense, against the hazards of fire, theft and accidental physical damage (including collision). This insurance must protect the interests of you and the lender. The policies issued by the insurance company will describe the terms and conditions. **YOU MAY CHOOSE THE PERSON THROUGH WHOM ANY INSURANCE IS OBTAINED.**

I/we, the undersigned (1) make the above representations, which are certified correct, for the purpose of securing credit; (2) authorize financial institutions to obtain consumer credit reports on me/us periodically and to gather employment history as they consider necessary and appropriate; (3) authorize your affiliates to obtain credit reports on me/us; (4) authorize financial institutions, affiliates, and others to exchange credit, account and financial information about me; (5) agree that if I/we gave you an e-mail address or cellular telephone number as a means of contacting me/us, you and any assignee to whom you may assign my/our credit agreement are specifically authorized to use that information to contact me/us regarding any credit account that you open for me/us; and (6) understand that the creditor or any financial institution to whom this application is submitted will retain this application whether or not it is approved, and that it is my/our responsibility to notify the creditor of any changes of name, address or employment.

FAIR CREDIT REPORTING ACT DISCLOSURE: This application for credit may be submitted to various financial institution(s). Before this application is submitted, the name(s) and address(es) of the institution(s) that will receive copies of this application will be disclosed to me/us.
CA, NY, OH, RI, VT AND WI RESIDENTS: SEE THE REVERSE SIDE OF THIS APPLICATION FOR FURTHER IMPORTANT DISCLOSURES AND INFORMATION.

CO-APPLICANT'S SIGNATURE MEANS YOU INTEND TO APPLY FOR JOINT CREDIT

X _____
 APPLICANT'S SIGNATURE DATE

X _____
 CO-APPLICANT'S SIGNATURE: DATE

- CALIFORNIA RESIDENTS - AN APPLICANT, IF MARRIED, MAY APPLY FOR A SEPARATE ACCOUNT.
- NEW YORK RESIDENTS - A CONSUMER REPORT MAY BE REQUESTED IN CONNECTION WITH THIS APPLICATION. UPON REQUEST, YOU WILL BE INFORMED AS TO WHETHER OR NOT A CONSUMER REPORT WAS REQUESTED, AND INFORMED OF THE NAME AND ADDRESS OF THE CONSUMER REPORTING AGENCY THAT FURNISHED THE REPORT. ON ANY UPDATE, RENEWAL OR EXTENSION OF THIS CREDIT, SUBSEQUENT CONSUMER REPORTS MAY BE UTILIZED.
- OHIO RESIDENTS - THE OHIO LAWS AGAINST DISCRIMINATION REQUIRE THAT ALL CREDITORS MAKE CREDIT EQUALLY AVAILABLE TO ALL CREDIT WORTHY 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.
- RHODE ISLAND RESIDENTS - A CREDIT REPORT MAY BE REQUESTED IN CONNECTION WITH THIS APPLICATION FOR CREDIT. VEHICLE INSURANCE MAY BE OBTAINED FROM A PERSON OF YOUR CHOICE.
- VERMONT RESIDENTS - BY SIGNING THIS APPLICATION YOU CONSENT AND GIVE US PERMISSION TO OBTAIN CREDIT REPORTS IN CONNECTION WITH ANY ACCOUNT ESTABLISHED WITH US AS A RESULT OF THIS APPLICATION FOR CREDIT PURPOSES OF REVIEWING THAT ACCOUNT, INCREASING THE CREDIT LINE ON THE ACCOUNT, OR TAKING COLLECTION ACTION ON THE ACCOUNT.
- MARRIED WISCONSIN RESIDENTS - WISCONSIN LAW PROVIDES THAT NO PROVISION OF ANY MARITAL PROPERTY AGREEMENT, OR UNILATERAL STATEMENT OR COURT ORDER APPLIED TO MARITAL PROPERTY WILL ADVERSELY AFFECT A CREDITOR'S INTERESTS UNLESS, PRIOR TO THE TIME THAT THE CREDIT IS GRANTED, THE CREDITOR IS FURNISHED WITH A COPY OF THE AGREEMENT, STATEMENT OR DECREE, OR HAS ACTUAL KNOWLEDGE OF THE ADVERSE PROVISION.