CONSUMER CREDIT APPLICATION

DEALER:

Sign Here:

(APPLICANTS SIGNATURE)

PHONE (512) 231-0205 • FAX (512) 231-0207

CONTACT: iNet

SS#		DOB/	SS#	DOB/_	
lame - Last	First	MI	Name - Last	First	
ddress			Address		
ity	State	Zip	City	State Zip	
ome Phone			Home Phone		
-mail Address			E-mail Address		
ent / Own / Other	Amt. Paid Monthly	How Long	Rent / Own / Other Arr	nt. Paid Monthly How Long	
aid To:			Paid To:		
urchase Price Of Home	Estimated Value	e	Purchase Price Of Home	Estimated Value	
rev. Address (If not 5 yrs. above)		How Long	Prev. Address (If not 5 yrs. above)	How Long	
mployer			Employer		
ddress		How Long	Address	How Long	
osition	WK. PH.	EXT.	Position	WK. PH. EXT.	
iross Mos. Income			Gross Mos. Income		
Other Income (Except ALIMON	Y, CHILD SUPPORT, OR SEPA	RATE MAINTENANCE INCOME NEED	NOT BE REVEALED IF BUYERS DO NO	OT WANT IT CONSIDERED AS A BASIS FOR R	EPAYMENT
ther income	Source		Other Income	Source	
revious Employer		How Long	Previous Employer	How Long	
osition	WK. PH.	EXT.	Position	WK. PH. EXT.	
ST Personal Reference		Address	.4	Home Phone	
ND Personal Reference		Address		Home Phone	
evious Boat Owner?	□ YES □ NO	If Yes, What Type	Of Boat?		
Bank Account (1)		Bank Account	t (2)	Bank Account (3)	
stallment Credit References	Collateral	Date Purch. Org	. Amt. Current Monthly Pmt.	Current Balance	
	***************************************	# P.			
······································					
New	ain.	Total Cash Price (Include Taxe	es) \$	NOTES:	
ear Use'd Total Cash Price (Include Taxe			NOTES.		
Make		Trade-In (Year)			
VIARE		1			
		Make			
		Model			
Engine Make/HP #1					
Engine Make/HP #1		ss	s		
Engine Make/HP #1			\$ ss Balance Equity	<u> </u>	
Model Engine Make/HP #1 #2 Frailer Application Taken By:		Allowance Les			

Sign Here: _

(CO-APPLICANT SIGNATURE)

DATE

DATE