

CREDIT APPLICATION

APP # _____

(A) APPLICANT INFORMATION				(B) JOINT APPLICANT INFORMATION			
PRINT FULL NAME				PRINT FULL NAME			
DOB		SSN		DOB		SSN	
STREET ADDRESS				STREET ADDRESS			
CITY		STATE	ZIPCODE	CITY		STATE	ZIPCODE
HOW LONG?	HOME PHONE		CELL PHONE	HOW LONG?	HOME PHONE		CELL PHONE
RESIDENTIAL STATUS		MONTHLY RENT/MORTGAGE PMT		RESIDENTIAL STATUS		MONTHLY RENT/MORTGAGE PMT	
LANDLORD OR MORTGAGE HOLDER'S NAME				LANDLORD OR MORTGAGE HOLDER'S NAME			
PREVIOUS ADDRESS (if less than 2 yrs at current address)				PREVIOUS ADDRESS (if less than 2 yrs at current address)			
CURRENT EMPLOYER'S NAME				CURRENT EMPLOYER'S NAME			
CURRENT EMPLOYER'S ADDRESS				CURRENT EMPLOYER'S ADDRESS			
GROSS MONTHLY SALARY		WORK PHONE		GROSS MONTHLY SALARY		WORK PHONE	
OCCUPATION/JOB TITLE			HOW LONG?	OCCUPATION/JOB TITLE			HOW LONG?
PREVIOUS EMPLOYER (if less than 2 yrs on current job)			HOW LONG?	PREVIOUS EMPLOYER (if less than 2 yrs on current job)			HOW LONG?
OTHER INCOME NOTE: Alimony, child support, or separate maintenance incomes do not have to be revealed unless the applicant wishes to have such sources considered as a basis for repayment of the requested credit amount.							
GROSS MONTHLY OTHER INCOME		OTHER INCOME SOURCE		GROSS MONTHLY OTHER INCOME		OTHER INCOME SOURCE	
REFERENCE 1			PHONE	ADDRESS			RELATIONSHIP
REFERENCE 2			PHONE	ADDRESS			RELATIONSHIP

FAIR CREDIT REPORTING ACT TO CONSUMER

THIS WILL ADVISE YOU THAT YOUR RETAIL INSTALLMENT SALES CONTRACT AND BUYER'S APPLICATION FOR SECURED DEBT WILL BE SUBMITTED TO FINANCIAL INSTITUTIONS AND THEIR AFFILIATES FOR PURCHASE AND CONSIDERATION AS TO WHETHER YOU MEET THEIR CREDIT REQUIREMENTS.

THE UNDERSIGNED FURTHER AUTHORIZES PACWEST CREDIT AND THEIR AFFILIATES AND/OR THEIR ASSIGNEES TO OBTAIN SUCH INFORMATION THAT THEY MAY REQUIRE IN ORDER TO VERIFY INFORMATION RELATIVE TO THIS REQUEST INCLUDING CONTACTING SPOUSES TO VERIFY SPOUSE RELATED INFORMATION.

I CERTIFY THAT ALL INFORMATION GIVEN BY ME ON THIS APPLICATION IS COMPLETE AND ACCURATE. I GIVE MY PERMISSION FOR PACWEST CREDIT WHICH WILL REVIEW THIS CREDIT APPLICATION, TO INVESTIGATE MY CREDIT AND EMPLOYMENT HISTORY, AND TO ANSWER QUESTIONS ABOUT THEIR CREDIT EXPERIENCE WITH ME INCLUDING BUT NOT LIMITED TO LATE PAYMENTS, MISSED PAYMENTS OR OTHER DEFAULTS, AND THIS INFORMATION MAY BY REPORTED IN YOUR CREDIT REPORT.

APPLICANT SIGNATURE _____
 REQUIRED _____ DATE _____

JOINT APPLICANT SIGNATURE _____
 REQUIRED _____ (means you intend to apply for joint credit) DATE _____

(A) APPLICANT Driver's License No. _____

(B) JOINT APPLICANT Driver's License No. _____

REQUESTED LOAN AMOUNT _____