

Finance & Mortgage Acceptance Corporation

A married person may apply for individual credit. I am applying for (please check appropriate box):

- JOINT CREDIT** with another person. Complete entire application.
 INDIVIDUAL CREDIT but rely on income or assets of another person as a basis for repaying the credit requested. Complete entire application.
 INDIVIDUAL CREDIT. Complete entire application except for "Co-applicant" information.

Driver's License # or Other I.D.

Please complete all appropriate sections, providing at least 5 years residence and employment history. This will enable your application to be processed as quickly as possible.

PERSONAL	APPLICANT'S NAME (First, M.I., Last)		CO-APPLICANT'S NAME				
	MAILING ADDRESS - STREET		CITY	STATE	ZIP		
	YEARS AT THIS ADDRESS	TELEPHONE NO.	TELEPHONE IN HOME <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NEARBY		TELEPHONE IN NAME OF <input type="checkbox"/> LISTED <input type="checkbox"/> UNLISTED		
	PREVIOUS ADDRESS (Last 5 Years)		YEARS AT PREVIOUS ADDRESS		NUMBER OF DEPENDENTS (Not Including Self)		
	APPLICANT'S DATE OF BIRTH	APPLICANT'S SOC. SEC. NO.	CO-APPLICANT'S DATE OF BIRTH		CO-APPLICANT'S SOC. SEC. NO.		
NEAREST RELATIVE NOT LIVING WITH APPLICANT			ADDRESS		RELATIONSHIP		
HOUSING	HOUSING STATUS <input type="checkbox"/> OWNS/BUYING <input type="checkbox"/> FREE <input type="checkbox"/> RENTS <input type="checkbox"/> WITH PARENTS		MONTHLY RENT/MORTGAGE PAYMENT Include Taxes, Insurance, Ground Rent, Condominium Fees, Mobile Home Lot Rent, Etc. As Applicable				
	LANDLORD/MORTGAGE HOLDER		ADDRESS		PRESENT MORTGAGE BALANCE		
EMPLOYMENT	APPLICANT'S EMPLOYER		ADDRESS		TELEPHONE		
	HOW LONG (YRS.)	OCCUPATION		NET MONTHLY SALARY			
	APPLICANT'S PREVIOUS EMPLOYER (LAST 5 YEARS)		OCCUPATION		TERM OF EMPLOYMENT		
	CO-APPLICANT'S EMPLOYER		ADDRESS		TELEPHONE		
	HOW LONG (YRS.)	OCCUPATION		NET MONTHLY SALARY			
	OTHER INCOME <input type="checkbox"/> MTHLY <input type="checkbox"/> YRLY	SOURCE OF OTHER INCOME					
	NOTE: ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE DISCLOSED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION.						
CREDIT/FINANCIAL	BANK NAME/LOCATION		CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/>	AUTO - YEAR, MAKE, MODEL		IF PURPOSE OF CONTRACT IS TO FINANCE AUTO - LIST INS. CO., AGENT AND PHONE NO.	
	CREDITOR NAME/LOCATION		TYPE OF ACCOUNT/COLLATERAL		ACCOUNT NO.	MONTHLY PMT.	BALANCE
	CURRENT AUTO					\$	\$
	CREDITOR					\$	\$
	CREDITOR					\$	\$
	CREDITOR					\$	\$
	TOTAL MONTHLY PAYMENTS AND TOTAL BALANCES OF OPEN ACCOUNTS		(USE REVERSE SIDE IF MORE SPACE NEEDED).				\$
HAS APPLICANT OR CO-APPLICANT DECLARED BANKRUPTCY <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, WHEN (DATE)					DATE DISCHARGED:		

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: I/We hereby certify that the foregoing statements are true and complete and are made for the purpose of determining my/our eligibility for credit. I/We agree that this statement shall remain your property whether or not the application is accepted. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness, including, but not limited to, procuring consumer reports from consumer reporting agencies and credit information from banks and other financial institutions and extenders of credit, references, present and former employers, merchants, landlords and creditors. Each applicant consents that, upon denial of the application based upon a consumer report or information received from a person other than a consumer reporting agency on any applicant creditor may make appropriate Fair Credit Reporting Act disclosures to all applicants.