Clearfield MOTORS

ALL INFORMATION ON THIS APPLICATION WILL BE VERIFIED.
ANY FALSE STATEMENTS MADE ON THIS APPLICATION
WILL RESULT IN NO CREDIT BEING EXTENDED TO YOU.

Name _____ (LAST) _____ (FIRST) _____ (MIDDLE)

Address _____ (STREET) _____ (CITY) _____ (ZIP)

Social Security Number _____ - _____ - _____ _____ (CELL PHONE) _____ (HOME PHONE)

Do you: ❒ Own Home ❒ Rent Home ❒ Live with others

How long have you lived at this address _____ (YEARS AND MONTHS) How long have you lived in this area _____ (YEARS)

Employer _____ (NAME, ADDRESS AND PHONE NUMBER)

Date began at this employer _____ Monthly Gross Income _____

Previous Employer _____ From _____ to _____

Have you ever had an automobile repossessed? ❒ Yes _____ (DATE) ❒ No

Have you ever filed for Bankruptcy? ❒ Yes ❒ No

How did you hear about us? _____

Applicant Signature _____ Date _____

BY SIGNING THIS FORM, THE APPLICANT VERIFIES ALL OF THE INFORMATION TO BE CORRECT AND THE APPLICANT ALSO AUTHORIZES LENDER TO CHECK CREDIT AND EMPLOYMENT HISTORY.

References: (must list 5 with address & phone numbers, 2 of which must be family members who don't live with you.

	NAME	ADDRESS	HOME PHONE	CELL PHONE
1.				
2.				
3.				
4.				
5.				