



Print, fill out, and fax to Phoenix Cruiser 574-266-8404

Application Type: <input type="radio"/> Individual <input type="radio"/> Business	Transaction Type: <input type="radio"/> Retail <input type="radio"/> Lease <input type="radio"/> Balloon	Dealer Number
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APPLICANT INFORMATION

Last Name (or trade name of business)		First	Middle Initial	Suffix (Jr.)	Date of Birth	Soc. Sec. # (or Tax ID #)
Home (or business) Phone Number	Cell Phone Number	Type of Enterprise <input type="radio"/> Corporation <input type="radio"/> Partnership <input type="radio"/> LLC <input type="radio"/> Proprietorship		Type of Business	Years in Business Years Months	
E-Mail Address		Present Address			Zip Code	City State
Time at Present Address Years Months		Residence Type <input type="radio"/> Owns Outright <input type="radio"/> Buying <input type="radio"/> Renting/Leasing <input type="radio"/> Family <input type="radio"/> Other			Monthly Rent/Mortgage Payment	

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.

Present Job Title		Present Employer	Employer Phone Number
Time at Present Job Years Months		Gross Income	Income Received <input type="radio"/> Monthly <input type="radio"/> Yearly

CO-APPLICANT INFORMATION

Last Name (or trade name of business)		First	Middle Initial	Suffix (Jr.)	Date of Birth	Soc. Sec. # (or Tax ID #)
Home (or business) Phone Number	Cell Phone Number	Type of Enterprise <input type="radio"/> Corporation <input type="radio"/> Partnership <input type="radio"/> LLC <input type="radio"/> Proprietorship		Type of Business	Years in Business Years Months	
E-Mail Address		Present Address			Zip Code	City State
Time at Present Address Years Months		Residence Type <input type="radio"/> Owns Outright <input type="radio"/> Buying <input type="radio"/> Renting/Leasing <input type="radio"/> Family <input type="radio"/> Other			Monthly Rent/Mortgage Payment	

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.

Present Job Title		Present Employer	Employer Phone Number
Time at Present Job Years Months		Gross Income	Income Received <input type="radio"/> Monthly <input type="radio"/> Yearly

DEALER USE ONLY

Intended Use <input type="radio"/> Personal <input type="radio"/> Business # of Units _____ New/Used <input type="radio"/> New <input type="radio"/> Demo <input type="radio"/> Used <input type="radio"/> Certified Used <input type="radio"/> Auction Special Programs <input type="radio"/> College Grad <input type="radio"/> Credit Line <input type="radio"/> ComTRAC <input type="radio"/> Custom Pmt. Plan <input type="radio"/> Lease to Retail <input type="radio"/> SmartBeginnings <input type="radio"/> Lease Loyalty <input type="radio"/> Single Pmt. Lease	VIN	Vehicle Year	Make	Model
	Style/Trim	Mileage	Cylinders	Trade Vehicle Year Trade Make
	Trade Model	Cash Selling Price/Cap Cost		Taxes Title/Lic./Reg./Other Fees
	Cash Downpayment	Rebate	Trade Allowance	Trade Balance Owed
	Service/Maint. Contract	GAP		Other Insurance
	Credit Life	Credit Disability	Term	Est. Monthly Payment
	MSRP	Wholesale (EDC/AWV)		Van Conversion/Upfit Cost Security Deposit

We intend to apply for joint credit. Applicant _____ Co-Applicant _____ (initials only)

SIGNATURES

See Page 2 for important notices. By signing below, I certify that I have read and agree to the terms of this application including terms on Page 2.	
Applicant's Signature _____ Date _____	Co-Applicant's Signature _____ Date _____