

Dealership Lot # \_\_\_\_\_

**CUSTOMER CONTACT INFORMATION**

\*Cell Phone # \_\_\_\_\_

\*Home/Residence # \_\_\_\_\_

Other Phone # (Relative, Friend, etc.) \_\_\_\_\_

\*Email Address \_\_\_\_\_

Best Time to Call Primary Phone\*  
(circle one)  
8am - 12noon      12 noon - 4pm  
4pm - 8pm

**CUSTOMER INFORMATION**

Optional: If you desire please circle one  
Mr.    Mrs.    Ms.

Last Name \_\_\_\_\_  
(Circle if applies) JR SR III

First Name \_\_\_\_\_

MI \_\_\_\_\_

Maiden Name \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

RESIDENCE MAILING

Residence Address Number \_\_\_\_\_ Street Name \_\_\_\_\_ Apt # \_\_\_\_\_

Person who's name appears on residence utilities \_\_\_\_\_

How long at address?  
Yrs \_\_\_\_\_ Mos \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address Number (if different from above) \_\_\_\_\_ Street Name \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Own/Rent? (Circle)  
**Own Rent**

Monthly Pmt \$ \_\_\_\_\_ Landlord Name & Address \_\_\_\_\_

Landlord Phone # \_\_\_\_\_

Previous Address # \_\_\_\_\_ Street Name \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How long at prev?  
Yrs \_\_\_\_\_ Mos \_\_\_\_\_

**PRIMARY EMPLOYMENT**

Employer Name \_\_\_\_\_

Department or Military Rank (if applicable) \_\_\_\_\_

Occupation \_\_\_\_\_

Address Number \_\_\_\_\_ Street Name \_\_\_\_\_

Phone # \_\_\_\_\_

Extension \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Supervisor \_\_\_\_\_

Monthly Income  
Gross \_\_\_\_\_

Pay Frequency  
Wk Bi 2 Wks Mth

Work Schedule / Primary Work Hours (circle one)  
6am - 3pm    9am - 6pm    12 noon - 9pm    3pm - 12 midnight    12 midnight - 9am

Hire Date (MM/DD/YY) \_\_\_\_\_

**SECONDARY EMPLOYMENT**

Employer Name \_\_\_\_\_

Occupation \_\_\_\_\_

Work Schedule / Work Hours \_\_\_\_\_

Hire Date (MM/DD/YY) \_\_\_\_\_

Address Number \_\_\_\_\_ Street Name \_\_\_\_\_

Phone # \_\_\_\_\_

Extension \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Supervisor \_\_\_\_\_

Monthly Income  
Gross \_\_\_\_\_

Pay Frequency  
Wk Bi 2 Wks Mth

Previous Employer \_\_\_\_\_

Previous Employer Address \_\_\_\_\_ Street Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Years on Job  
Yrs \_\_\_\_\_ Mos \_\_\_\_\_

**OTHER INCOME**

\*\*Other Income Source \_\_\_\_\_

\*\*Amount and Frequency of Other Income \_\_\_\_\_

\*\*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.

**BANK INFO**

Savings Account  
Yes  No

Checking Account  
Yes  No

Name \_\_\_\_\_ Location \_\_\_\_\_

**California Applicants:** If you are married, you may apply for a separate account.

**Ohio Applicants:** The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

**Maine Applicants:** You are required by the terms of the contract to insure the motor vehicle which is the subject of this credit transaction. You have the right to free choice in the selection of the agent and insurer through or by which the insurance is to be placed, including the right to choose an agent or broker whether or not that agent or broker is affiliated with the creditor. Obtaining insurance products from a particular agent or broker does not affect credit decisions by the creditor regarding you, unless the insurance product violates the terms of the extension of credit regarding the adequacy of coverage or is otherwise not approved by the creditor.

**New York Applicants:** In connection with your application for credit, a consumer report (credit report) may be requested. On your request, we will advise you if the report was actually ordered, and if so, the name and address of the agency that furnished the report.

**\*Email and Cellular Communication Consent:** By signing below I authorize and give consent to Credit Acceptance to use the email address and cellular telephone numbers I have provided on this application or which Credit Acceptance obtains to communicate with me for any purpose whatsoever, including but not limited to communication regarding my account activity, status and to collect any debt obligation I owe to Credit Acceptance. By providing a cellular telephone number on this application or to Credit Acceptance after my contract is assigned to them, I am consenting to receiving autodialed and artificial or prerecorded message calls from Credit Acceptance or its third party debtor collector at those numbers.

**Spousal Consent:** By signing below I authorize and give consent to Credit Acceptance to discuss my account with my spouse, if applicable, including discussing my account activity, status and payment arrangements.

\_\_\_\_\_  
Signature of Applicant/Joint Applicant

\_\_\_\_\_  
Date