

# CREDIT APPLICATION

**Dealer Name:** Colaw RV Parts **Address:** 10389 Cimarron Rd., Carthage, MO 64836

**Phone No.:** 417-548-2125

**Fax No.:** 417-548-7219

**SALESPERSON:**

APPLICANT INFORMATION				CO-APPLICANT INFORMATION			
Name (last, first, middle)				Name (last, first, middle)			
Birth Date		SS #		Birth Date		SS #	
No. of financial dependants incl. Self				No. of financial dependants incl. Self			
Marital Status M=Married S=Separated U=Unmarried (single,divorced,widowed)				Marital Status M=Married S=Separated U=Unmarried (single,divorced,widowed)			
Present Street Address				Present Street Address			
City, State, Zip Code				City, State, Zip Code			
How Long at Present Address YRS MONTHS		Home Phone #		How Long at Present Address YRS MONTHS		Home Phone #	
Residential Status H=Home Owner R=Renter P=Parents O=Owner				Residential Status H=Home Owner R=Renter P=Parents O=Owner			
Monthly Rent/Mtg.Payment \$				Monthly Rent/Mtg.Payment \$			
Landlord/Mtg.Holders Name			Phone #	Landlord/Mtg.Holders Name			Phone #
Balance on Mtg. \$		account #		Balance on Mtg. \$		account #	
Applicant's Employment				CO-Applicant's Employment			
Employer's Name		Employer's City, State		Employer's Name		Employer's City, State	
Employer's Business		Supervisor		Employer's Business		Supervisor	
Salary(Gross) H=Hour W=Week Per M=Month Y=Year		Work Phone #		Salary(Gross) H=Hour W=Week Per M=Month Y=Year		Work Phone #	
Title or Occupation			Hire Date	Title or Occupation			Hire Date
Previous Employer		Employed from To		Previous Employer		Employed from To	
Prev. Employer's Address		Phone #		Prev. Employer's Address		Phone #	
Source of Other Inc.		Monthly Amount \$		Source of Other Inc.		Monthly Amount \$	

**FOR DEALER'S OR CREDITOR'S USE ONLY**

All the statements made in this application are true and correct and are made for the purpose of obtaining credit. You are authorized to investigate my credit record to verify my credit, employment, and income references and to obtain such other information as you deem necessary and to give credit reporting agencies and others information regarding your experience with me.

**applicant signature required X** **Date**

**applicant driver's license no.**

**closest living relative** **Phone**

**co-applicant signature required X** **Date**

**co-applicant driver's license no.**

**closest living relative** **Phone**

1.Cash sale price.....	\$	
2.Cash down payment.....	\$	
3.a) Gross trade-in.....	\$	
b) Less amt owed on trade-in.....	\$	
c) Net trade-in.....	\$	
4.Total down payment (item 2 + item 3c).....		\$
5.Amount of unpaid cash sale price (item 1-item 4).....		\$