

APPLICANT

FIRST NAME	MIDDLE NAME	LAST NAME	DATE OF BIRTH	SOCIAL SECURITY #	CELL PHONE
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MAILING ADDRESS	MARITAL STATUS <small>() MARRIED () UNMARRIED () SEPARATED</small>	HOME PHONE
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CITY	STATE	ZIP	HOW LONG?
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RESIDENCE ADDRESS (IF DIFFERENT FROM MAILING)	DRIVERS LIC.#	EXP YEAR
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CITY	STATE	ZIP	HOW LONG?
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PREVIOUS ADDRESS (WITHIN 3 YEARS)			
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CITY	STATE	ZIP	HOW LONG?
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NEAREST RELATIVE

FIRST NAME	MIDDLE NAME	LAST NAME	RELATIONSHIP	PHONE
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ADDRESS				
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CITY	STATE	ZIP	
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EMPLOYER

EMPLOYERS NAME				
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ADDRESS	BUSINESS PHONE
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CITY	STATE	ZIP	HOW LONG?
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POSITION AND JOB TITLE	SALARY
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PREVIOUS EMPLOYER (WITHIN 3 YEARS)	
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ADDRESS	BUSINESS PHONE
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CITY	STATE	ZIP	HOW LONG?
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FINANCES

ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE ALL CONSIDERED AS A BASIS FOR REPAYING THE OBLIGATION.

SOURCE OF OTHER INCOME	AMOUNT <small>() WEEK () MONTH () YEAR</small>	HOW LONG?
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NAME OF BANK		
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ADDRESS				
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CITY	STATE	ZIP	<input type="checkbox"/> CHECKING <input type="checkbox"/> IRA <input type="checkbox"/> SAVINGS <input type="checkbox"/> C/CARD <input type="checkbox"/> LOAN <input type="checkbox"/> NO ACCT.
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<input type="checkbox"/> RENTING <input type="checkbox"/> BUYING MORTGAGE HOLDER OR LANDLORD	<input type="checkbox"/> HOUSE <input type="checkbox"/> MOBILE HOME	COST	MONTHLY PAY	BALANCE
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CO-APPLICANT

IF YOU ARE APPLYING FOR JOINT CREDIT WITH ANOTHER PERSON COMPLETE THIS SECTION OF THE APPLICATION.

FIRST NAME	MIDDLE NAME	LAST NAME	DATE OF BIRTH	SOCIAL SECURITY #	HOME PHONE
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MAILING ADDRESS	DRIVER'S LIC#	EXP YEAR
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CITY		STATE	ZIP	RELATION TO APPLICANT		
NEAREST RELATIVE						
FIRST NAME	MIDDLE NAME	LAST NAME	RELATIONSHIP		PHONE	
ADDRESS						
CITY		STATE	ZIP	COUNTY		
EMPLOYER						
EMPLOYERS NAME						
ADDRESS					BUSINESS PHONE	
CITY		STATE	ZIP	HOW LONG?		
POSITION AND JOB TITLE				SALARY		
NAME OF BOAT/RV						
		STATE OR IDENTIFICATION (IF ANY)				SALE PRICE \$ _____
<input type="checkbox"/> NEW <input type="checkbox"/> USED <input type="checkbox"/> F/GLASS <input type="checkbox"/> ALUMINUM		YEAR BUILT	MANUF. BY	MODEL	LENGTH	TAX \$ _____
INVOICE \$						FEES \$ _____
TRADE INFORMATION						GROSS TRADE \$ _____
TRADE PAYOFF TO:						PAYOFF \$ _____
						NET TRADE \$ _____
						CASH DOWN \$ _____
						TOTAL DOWN PAYMENT \$ _____
EMAIL TO:		aarmco2@livingston.net				UNPAID BALANCE \$ _____
FAX TO:		936-327-7119				
HAVE YOU EVER HAD A CAR OR OTHER MERCHANDISE REPOSSED? IF YES, WHEN?					EVER FILE BANKRUPTCY? IF YES, WHEN?	

I UNDERSTAND AND AGREE THAT AARMCO AUTO AND RV AND THE BANKS THEY WORK WITH MAY MAKE CREDIT INQUIRIES AND EMPLOYMENT INQUIRIES ABOUT ME, MAY PROVIDE AND EXCHANGE INFORMATION ABOUT ME WITH ANY SOURCE OF CREDIT INFORMATION TO WHICH YOU MAY APPLY, AND MAY DISCLOSE INFORMATION ABOUT ME WITH OTHER FINANCIAL INSTITUTIONS FOR PURPOSES OF FULFILLING THIS CREDIT REQUEST. I AGREE TO NOTIFY THE BANK OF ANY MATERIAL CHANGES IN THE ABOVE STATEMENT. I AUTHORIZE THE BANK TO OBTAIN SUCH INFORMATION AS THE BANK MAY REQUIRE CONCERNING THE STATEMENT MADE IN THIS APPLICATION AND AGREE THAT THE APPLICATION SHALL REMAIN THE BANK PROPERTY WHETHER OR NOT THE LOAN IS GRANTED. THE ABOVE NAMED APPLICANT HEREBY DECLARES THE FOREGOING STATEMENT IS TRUE IN EVERY RESPECT. I UNDERSTAND THAT AN INVESTIGATION MAY BE MADE WHEREBY THAT INFORMATION MAY BE OBTAINED THROUGH PERSONAL INTERVIEWS WITH MY NEIGHBORS, FRIENDS OR OTHERS WHOM I AM AQUINTED. THIS INQUIRY MAY INCLUDE INFORMATION TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS AND MODE OF LIVING. I FURTHER UNDERSTAND THAT I HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME TO RECEIVE ADDITIONAL DETAILED INFORMATION ABOUT THE NATURE AND SCOPE OF THE INVESTIGATION. AND WILLFUL MISPRESENATATION ON THIS STATEMENT COULD RESULT IN A FINE AND/OR IMPRISONMENT UNDER THE PROVISION OF THE US CRIMINAL CODE.

DATE	SIGNATURE OF APPLICANT	DATE	SIGNATURE OF CO-APPLICANT
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