

REPUBLIC FINANCE PURCHASER'S STATEMENT (Dealer Use)

Dealer Name _____ Phone No. _____ Person to Contact _____
 Merchandise/Service _____ Sales Price \$ _____ Down Payment \$ _____ Amount Financed \$ _____ Term _____ Payment _____

If married, you have the right to apply for credit separately from or jointly with your spouse. Joint Credit Individual Credit in my name only.
 NOTICE TO APPLICANTS RESIDING IN MISSISSIPPI, TENNESSEE AND SOUTH CAROLINA: Do not furnish information concerning your spouse unless your spouse will be contractually liable upon this account or you are relying on your spouse's income as a basis for repayment of the credit requested.

Purchaser(s) <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	Last Name	First	Middle Initial	SS#	DL # and State	Date of Birth
	Co-Applicant's Last Name (if applying for joint credit)		First	Middle Initial	SS#	DL # and State
Home Address		City	State	Zip	How Long	# of Dependents
<input type="checkbox"/> Rent <input type="checkbox"/> Own	Landlord or Mortgage Holder's Name and Address			Monthly Payments	Balance Owed	Estimated Market Value
Previous Address		City	State	Zip	How Long	Banking Relationships (Check One): <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Checking/Savings
Employer Name		Address		Position	How Long	Employer's Phone #
Previous Employer (if less than 2 years)		Address		Position	How Long	Source of Other Income
Income from alimony, child support or maintenance payments need not be revealed if you choose not to rely upon such income in applying for credit.						Other Income
Alimony, child support or separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral understanding						\$
Co-Applicant's Employer Name		Address		Position	How Long	Employer's Phone #
Credit Reference and Address		Credit Reference and Address				Total Monthly Income
Name of Relative Not Living With You		Address	City	State	Zip	Phone #
Have You Filed Bankruptcy Within The Last 10 Years? <input type="checkbox"/> No <input type="checkbox"/> Yes - Year						Total Car Payments
Automobile #1-Make _____		Year _____	Financed By _____		Auto Plate # _____	\$
Automobile #2-Make _____		Year _____	Financed By _____		Auto Plate # _____	\$

(LA ONLY) - To the extent permitted by the Louisiana Consumer Credit Law, I hereby waive any privileged communication I may have with any and all persons named above: Everything that I have stated in the application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.

PURCHASER'S SIGNATURE

DATE

OTHER SIGNATURE (Where Applicable)

DATE