

Quickway Auto Sales

Quality Pre-Owned Cars and Trucks
171 Seward Ave, Bradford, PA 16701

Please Complete Form
and Fax to
814-368-6642

| | | | | | | | |
|--|--------------|---|--|--|--|--------------------------------------|--|
| Dealer | | F&I Rep | | Phone No. | | Date | |
| VEHICLE BEING PURCHASED | | | | | | | |
| <input type="checkbox"/> NEW <input type="checkbox"/> USED | Year | Make | Model | | Body Style | Mileage | |
| Options: | | <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Tilt | <input type="checkbox"/> Styled Wheels | <input type="checkbox"/> Other _____ | | |
| | | <input type="checkbox"/> Power Locks | <input type="checkbox"/> Cruise | <input type="checkbox"/> Anti-Lock Brakes | <input type="checkbox"/> Other _____ | | |
| | | <input type="checkbox"/> Power Windows | <input type="checkbox"/> Stereo/Cassette | <input type="checkbox"/> 4-Wheel Drive | <input type="checkbox"/> Other _____ | | |
| \$ SALES FIGURES \$ | | | | | | | |
| Selling Price with Tax & Fees | | Trade-in Year | Make | Gross Allowance | | Lien Payoff | |
| Cash Down | | Amount Financed | | Term Requested | | Approximate Payment | |
| | | | | | | Cost of Warranty | |
| APPLICANT | | | | | | | |
| Name | | | DOB | Phone No. | | Social Security Number | |
| Address | | | How Long? | <input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE | <input type="checkbox"/> OWN HOME FREE & CLEAR <input type="checkbox"/> OTHER | Monthly Payment | |
| Former Address (if less than 5yrs. at present) | | | How Long? | No. of Dep | Checking Account Where? _____ Savings Account Where? _____ | | |
| Employer | | How Long? | Address | | Position | Business Phone & Ext. | |
| Former Employer (if less than 5yrs. at present emp.) | | | How Long? | Position | | INCOME | |
| Name, Address, and Phone No. of nearest relative | | | | Ever filed Bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Gross Monthly from Employer \$ _____ | |
| *Income you may receive from alimony, child support or maintenance payments need not be revealed if you do not choose to rely on such income in applying for credit. | | | | *Other Income & Source _____ \$ _____ | | Total Monthly Income \$ _____ | |
| CO-APPLICANT | | | | | | | |
| Name | | | DOB | Phone No. | | Social Security Number | |
| Address | | | How Long? | <input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE | <input type="checkbox"/> OWN HOME FREE & CLEAR <input type="checkbox"/> OTHER | Monthly Payment | |
| Former Address (if less than 5yrs. at present) | | | How Long? | No. of Dep. | Checking Account Where? _____ Savings Account Where? _____ | | |
| Employer | | How Long? | Address | | Position | Business Phone & Ext. | |
| Former Employer (if less than 5yrs. at present emp.) | | | How Long? | Position | | INCOME | |
| Name, Address, and Phone No. of nearest relative | | | | Ever filed Bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Gross Monthly from Employer \$ _____ | |
| *Income you may receive from alimony, child support or maintenance payments need not be revealed if you do not choose to rely on such income in applying for credit. | | | | *Other Income & Source _____ \$ _____ | | Total Monthly Income \$ _____ | |
| CREDIT REFERENCES | | | | | | | |
| Applicant | Co-Applicant | Creditor | Security | Payment | Balance | Reference | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| <p>I We hereby certify that the foregoing statements are true and complete and are made for the purpose of determining my/our eligibility for credit. I/We agree that this statement shall remain your property, whether or not the application is accepted. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness, including, but not limited to, procuring consumer reports from consumer reporting agencies and credit information from banks and other financial institutions and extenders of credit references present and former employers, merchants, landlords and creditors. Each applicant consents that upon denial of the application based upon a consumer report or information received from a person other than a consumer reporting agency on any applicant creditor may make appropriate Fair Credit Reporting Act disclosures to all applicants.</p> | | | | | | | |
| Signature of Applicant _____ Date _____ | | | | Signature of Co-Applicant _____ Date _____ | | | |

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