

**Fax completed application to:  
770-888-0925**

**Credit Application**

ActionNow Auto Sales

**SignatureFINANCING®**

**DEALER INFORMATION**

PLEASE USE BLACK INK

DEALER NAME \_\_\_\_\_ DEALER NUMBER \_\_\_\_\_ PROGRAM TYPE: \_\_\_\_\_

**APPLICANT INFORMATION (MARRIED MAY APPLY AS AN INDIVIDUAL)**

**APPLICANT (PRINCIPAL DRIVER OF VEHICLE)**

**JOINT APPLICANT RELATIONSHIP \_\_\_\_\_**

FULL NAME FIRST MI LAST				<input type="checkbox"/> SR <input type="checkbox"/> JR	FULL NAME FIRST MI LAST				<input type="checkbox"/> SR <input type="checkbox"/> JR
STREET ADDRESS			APT #	HOW LONG? YRS.   MOS.	STREET ADDRESS			APT #	HOW LONG? YRS.   MOS.
CITY	STATE	ZIP	HOME PHONE ( )		CITY	STATE	ZIP	HOME PHONE ( )	
DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER			DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER		
<input type="checkbox"/> OWN/BUYING	<input type="checkbox"/> LIVE WITH RELATIVE	MONTHLY PAYMENT			<input type="checkbox"/> OWN/BUYING	<input type="checkbox"/> LIVE WITH RELATIVE	MONTHLY PAYMENT		
<input type="checkbox"/> RENT/LEASE	<input type="checkbox"/> OTHER _____	\$			<input type="checkbox"/> RENT/LEASE	<input type="checkbox"/> OTHER _____	\$		

EMPLOYER NAME			HOW LONG? YRS.   MOS.	EMPLOYER NAME			HOW LONG? YRS.   MOS.
EMPLOYER ADDRESS				EMPLOYER ADDRESS			
POSITION/TITLE	WORK PHONE ( )	GROSS ANNUAL SALARY \$		POSITION/TITLE	WORK PHONE ( )	GROSS ANNUAL SALARY \$	
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 DEBT. OTHER INCOME SOURCE			ANNUAL AMOUNT \$	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 DEBT. OTHER INCOME SOURCE			ANNUAL AMOUNT \$
PREVIOUS EMPLOYER OR SCHOOL			HOW LONG? YRS.   MOS.	PREVIOUS EMPLOYER OR SCHOOL			HOW LONG? YRS.   MOS.

REFERENCES			REFERENCES		
AUTO CREDIT REFERENCE (A/C #)	TRADING? YES   NO	BALANCE \$	AUTO CREDIT REFERENCE (A/C #)	TRADING? YES   NO	BALANCE \$
OTHER CREDIT REFERENCE		BALANCE \$	OTHER CREDIT REFERENCE		BALANCE \$
NEAREST RELATIVE (NOT LIVING WITH YOU)		RELATIONSHIP	NEAREST RELATIVE (NOT LIVING WITH YOU)		RELATIONSHIP
ADDRESS		PHONE ( )	ADDRESS		PHONE ( )
FRIEND OR RELATIVE		PHONE ( )	FRIEND OR RELATIVE		PHONE ( )

**SIGN**

NOTICE: I, THE UNDERSIGNED, HEREBY AUTHORIZE THE DEALER, INFINITI FINANCIAL SERVICES, NISSAN-INFINITI LT AND/OR \_\_\_\_\_ (COLLECTIVELY "PROSPECTIVE CREDITORS") TO VERIFY CREDIT AND EMPLOYMENT HISTORY AS STATED ABOVE AND TO ANSWER QUESTIONS ABOUT CREDIT EXPERIENCE WITH ME. IF THIS APPLICATION IS MADE PURSUANT TO ANY CREDIT PROGRAM FOR ATTENDEES AND/OR GRADUATES OF SCHOOLS OR EDUCATIONAL INSTITUTIONS, THEN PROSPECTIVE CREDITORS MAY VERIFY MY ELIGIBILITY FOR SUCH PROGRAM, INCLUDING BY INQUIRY TO MY SCHOOL(S) OR EDUCATIONAL INSTITUTION(S). INSURANCE RELATED TO THE CREDIT FOR WHICH I AM APPLYING MAY BE PURCHASED FROM AN INSURER OR AGENT OF MY CHOICE WHO MEETS PROSPECTIVE CREDITOR STANDARDS. IN CONNECTION WITH THIS APPLICATION FOR CREDIT, PROSPECTIVE CREDITORS MAY REQUEST A CONSUMER (CREDIT) REPORT. ON MY REQUEST, PROSPECTIVE CREDITORS WILL ADVISE ME IF THE REPORT WAS ACTUALLY ORDERED AND IF SO, THE NAME AND ADDRESS OF THE AGENCY THAT FURNISHED THE REPORT. PROSPECTIVE CREDITORS MAY ORDER SUBSEQUENT CONSUMER (CREDIT) REPORTS.

I AUTHORIZE PROSPECTIVE CREDITORS TO ASK MY PAST AND CURRENT CREDITORS ("CREDIT REFERENCES"), INCLUDING CREDITORS LISTED ABOVE OR ON MY CONSUMER (CREDIT) REPORT, ABOUT MY CREDIT PERFORMANCE WITH THEM. PROVISION BY PROSPECTIVE CREDITORS OF A COPY OF THIS AUTHORIZATION SHALL SERVE AS MY DIRECTION THAT MY CREDIT REFERENCES PROVIDE MY CREDIT PERFORMANCE INFORMATION.

EVERYTHING THAT I HAVE STATED IN THIS APPLICATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND CONSTITUTES MY ENTIRE APPLICATION FOR CREDIT WITH THE PROSPECTIVE CREDITORS. I UNDERSTAND THAT PROSPECTIVE CREDITORS WILL RETAIN THIS APPLICATION WHETHER OR NOT IT IS APPROVED. I WILL NOTIFY PROSPECTIVE CREDITORS, IF APPLICABLE, WITHIN A REASONABLE TIME OF ANY CHANGE IN MY NAME, ADDRESS OR EMPLOYMENT.

TO THE EXTENT PERMITTED BY LAW, I CONSENT THAT YOU, YOUR ASSIGNEES, AND YOUR AGENTS MAY CONTACT ME AT ANY TELEPHONE NUMBER YOU HAVE FOR ME, INCLUDING ANY CELL PHONE NUMBERS AND ANY PHONE NUMBERS LISTED ON THIS DOCUMENT, BY ANY MEANS YOU SELECT, INCLUDING AN AUTOMATIC TELEPHONE DIALING SYSTEM, TEXT MESSAGING, AND/OR AN ARTIFICIAL OR PRE-RECORDED VOICE.

**CO-APPLICANT'S SIGNATURE MEANS YOU INTEND TO APPLY FOR JOINT CREDIT.**

X \_\_\_\_\_ DATE \_\_\_\_\_  
SIGNATURE OF APPLICANT

X \_\_\_\_\_ DATE \_\_\_\_\_  
SIGNATURE OF JOINT APPLICANT

DEALER \_\_\_\_\_