PERSONAL CREDIT APPLICATION

REPRESENTATIVE

PERSONAL INFORMATION

FIRST NAME	MIDDLE INITIAL	LAST NAME			DATE OF APPLICATION
SOCIAL SECURITY NUMBER	DRIVERS LICENSE #	LIC. STATE	DATE OF BIRTH	◯ MARRIED ◯ SEPARATED ◯ UNMARRIED	NO. OF DEPENDENTS
ADDRESS		CITY		STATE	ZIP
HOME PHONE NUMBER	MOBILE PHONE NUMBER	EMAIL ADDRESS			
◯ OWN ◯ RENT	MORTGAGE COMPANY OR LANDLORD NAME	PHONE NUMBER	HOW LONG? YRS/MOS	YEARS IN AREA	
FORMER ADDRESS (IF LESS THAN FIVE YEARS),CITY,STATE, ZIP CODE				HOW LONG? YRS/MOS	
CREDIT CARD # TO PRE AUTHORIZE MONTHLY REPAYMENT OF ADVANCE			NAME ON CARD		
BILLING ADDRESS			EXPIRATION DATE	CVV CODE	

LIST OF RELATIVES NOT LIVING WITH YOU

FIRST AND LAST NAME	CITY/STATE	PHONE NUMBER	RELATIONSHIP
FIRST AND LAST NAME	CITY/STATE	PHONE NUMBER	RELATIONSHIP
FIRST AND LAST NAME	CITY/STATE	PHONE NUMBER	RELATIONSHIP

HAVE YOU EVER TAKEN BANKRUPTCY?	ARE YOU SUBJECT TO ANY TAX LIENS?	ARE YOU A DEFENDANT IN ANY LEGAL ACTION?	HAVE YOU EVER HAD ANY ITEM REPOSSESSED?
◯ NO ◯ YES-EXPLAIN BELOW	◯ NO ◯ YES-EXPLAIN BELOW	◯ NO ◯ YES-EXPLAIN BELOW	◯ NO ◯ YES-EXPLAIN BELOW

EXPLANATION:

COMPLETE THIS SECTION ONLY IF THIS IS A JOINT APPLICATION WITH YOUR SPOUSE, OR IF YOU ARE RELYING ON YOUR SPOUSE'S INCOME OR ASSETS AS A BASIS FOR REPAYMENT OF THE ADVANCE REQUESTED, OR IF YOU RESIDE IN A COMMUNITY PROPERTY STATE.

SPOUSE'S NAME (FIRST, M.I., LAST)		DATE OF BIRTH	SOCIAL SECURITY NUMBER
SPOUSE'S EMPLOYER, CITY & STATE		POSITION HELD	HOW LONG?
SPOUSE'S MOBILE PHONE NUMBER	SPOUSE'S WORK PHONE NUMBER	SPOUSE'S EMAIL ADDRESS	

APPLICANT'S EMPLOYMENT HISTORY FOR PAST FIVE YEARS

CURRENT EMPLOYER	PHONE NUMBER	POSITION	HOW LONG? YRS/MOS
IMMEDIATE PAST EMPLOYER	PHONE NUMBER	POSITION	HOW LONG? YRS/MOS
OTHER PREVIOUS EMPLOYER	PHONE NUMBER	POSITION	HOW LONG? YRS/MOS

VEHICLE OWNERSHIP

MAKE, MODEL & YEAR OF VEHICLE?	IF FINANCED, NAME OF LENDER(S)		PURCHASER TO DRIVE? ◯ YES ◯ NO
FINANCE COMPANY NAME, CITY AND STATE ZIP		CONTACT	PHONE NUMBER
LICENCE PLATE #		STATE REGISTERED	

CASE INFORMATION (if known)

TYPE OF CASE	CASE STATE	NAME OF COURT		RELATIONSHIP TO APPLICANT
LAW FRM REPRESENTING YOU	NAME OF LAWYER.			DOCKET #.
ADDRESS		CITY	STATE	ZIP
OFFICE PHONE	MOBILE PHONE NUMBER	EMAIL ADDRESS		

ASSETS (What you own)		LIABILITIES (What you owe)	
ACCOUNTS RECEIVABLE		TOTAL OWING ON CREDIT CARDS	
		AMOUNTS OWINING TO RELATIVES & EMPLOYERS	
REAL ESTATE OWNED (RESIDENCE FIRST, THEN OTHERS)		MORTGAGE LENDERS ON REAL ESTATE OWNED	
PERSONAL VEHICLES OWNED		LIST NAMES OF LENDERS ON PERSONAL VEHICLES	
OTHER ASSETS (ITEMIZE)		OTHER DEBTS (ITEMIZE)	
TOTAL ASSETS		**TOTAL LIABILITIES**	

TIME PERIOD		OTHER INCOME	DEDUCTIONS & EXPENSES	

For purposes of establishing and maintaining credit, the undersigned submits the foregoing statement and information contained on this form, both written and printed, and including supplemental sheets, if any, as being a full, true, and correct statement of my financial condition and all above matters, on the date stated. The undersigned agrees to notify you immediately in writing of any materially unfavorable change in financial condition or the above matters, and in the absence of such notice or of a new and full written statement, all matters herein may be considered as a continuing statement and substantially correct. The undersigned hereby authorizes Salt Lake Funding, Inc., or its agents and assigns to inquire into, and receive any information concerning my character, reputation, personal characteristics, mode of living, and all information from creditors which Salt Lake Funding, Inc. deems relevant for granting and collection of the proposed advance. This authorization shall be effective from the date which this application is signed and is extinguished automatically upon payment of the present advance, if any is granted.

The undersigned expressly authorizes any person, including but not limited to federal and state agencies or any of their vendors or contractors, to release to Salt Lake Funding, Inc.., or its agents, any information, including but not limited to the undersigned's driver and safety inspection history, vehicle accident reports, driving violations and driver status, credit experience and account information, about me. The undersigned acknowledges and consents to Salt Lake Funding, Inc. and/or any of its agents monitoring and recording telephone calls, regardless of which party initiates the call.

I further represent that the undersigned has not violated any federal or state laws relating to liquor, narcotics or contraband; and no such person has been convicted of any felony.

Customer Name _____ Customer Name _____

X _____ X _____

Signature Date Signature Date