



Marker 5
FINANCIAL SERVICES

DEALER EMAIL _____

DEALER _____

FAX TO (239) 437-0053

Applicant	First Name Middle Last			Social Security Number		Birth Date	Area Code & Phone #	
	Street			City	State	Zip Code		
	Marital Status	Years at Address	Previous Address (if less than 5 years)				Years Months	
	<input type="checkbox"/> Renting <input type="checkbox"/> Buying <input type="checkbox"/> Other	Payments	Mortgage Holder or Landlord and Address		Value	Balance of Mortgage		
Name and Address of Nearest Relative Not living with you					Relationship	Telephone		
Employment	Present Employer - Address, City & State						Gross Monthly Income	
	Area Code & Employer Phone number			Sources of Additional Income			Additional Income *	
	Job Title			Number of Years At Job	TOTAL GROSS INCOME - MONTH		\$	
	Name & Address of Previous Employer				Job Title	Years Employed		
Co-Applicant	First Name Middle Last			Social Security Number		Birth Date	Area Code & Phone #	
	Street			City	State	Zip Code		
	Years at Address	Previous Address (if less than 5 years)					Years Months	
	<input type="checkbox"/> Renting <input type="checkbox"/> Buying <input type="checkbox"/> Other	Payments	Mortgage Holder or Landlord and Address		Value	Gross Monthly income		
	Present Employer-Address, City & State				Source of Additional Income		Additional Income *	
	Job Title		Employer Phone Number		Number of Years At Job	TOTAL GROSS INCOME - MONTH		\$
Name & Address of Previous Employer				Job Title	Years Employed			
Credit	Checking Account							
	Savings Account							
	Credit References							

**FAX CALL BACKS TO MARKER 5
(239)-437-0053 OR CALL
(239)-437-0085**

DO NOT WRITE IN BOX

Sales Tax \$ _____

Selling Price (including Tax) \$ _____

Trade in \$ _____

Trade Debt \$ _____

Trade Equity \$ _____

Cash Down \$ _____

Total Down Payment \$ _____

Amount Financed \$ _____

Dealer Cost \$ _____

Unit year _____

Unit Make _____

Unit Model _____

*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 obligation

Acknowledgement: I authorize and acknowledge that consumer credit reports and employment history reports about me may be requested in connection with this application and/or on an ongoing basis in connection with updates, renewals, extensions or enforcement of any credit granted as a result of this application. I certify that the above information is correct to the best of my knowledge. The creditor will retain this application whether or not it is approved. During the review of my application you may obtain a consumer report and if the application is approved you may at any time in the future obtain additional consumer reports to review my account. I have the right to ask for the name of the consumer reporting agency which gave the Bank the consumer report.

APPLICANT SIGNATURE _____ CO-APPLICANT SIGNATURE _____
DATE _____ DATE _____