



AutoKing

CREDIT APPLICATION

2211 Birch St
Eau Claire, WI
Phone (715)834-2277
Fax (715)895-8409

A. APPLICANT INFORMATION

Last Name:		First Name:		MI:	
Date of birth:	SSN:	Home Phone:			
Current Address:		Cell Phone:			
City:	State:	ZIP Code:			
Own Rent (Please check)	Mortgage/Rent Amount:	How long? ____YR____MO			
Landlord Name:			Landlord Phone:		
Email Address:			Name of Bank/Credit Union:		

EMPLOYMENT / INCOME INFORMATION

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.

Current employer:		How long? ____YR____MO	
Employer address (incl. City, State, ZIP):			
Phone:		Supervisor Name:	
Position:	Income: \$ /Month	# of hours worked/week:	
Previous Employer (If less Than One Year at Current Job):			
How Long:	Position:	Phone:	
Other income sources (Please specify source/amount):			

B. CO-APPLICANT INFORMATION, IF FOR A JOINT ACCOUNT

Relation to Applicant:					
Last Name:		First Name:		MI:	
Date of birth:	SSN:	Home Phone:			
Current address:		Cell Phone:			
City:	State:	ZIP Code:			
Own Rent (Please check)	Mortgage/Rent Amount:	How long? ____YR____MO			
Landlord Name:			Landlord Phone:		
Email Address:			Name of Bank/Credit Union:		

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Phone:		Supervisor Name:	
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FOR SELLER, DEALER & OFFICE USE ONLY

Cash Price	\$	VEHICLE TO BE FINANCED:			
Tax, title & license fees	\$	Year:	Make:	Model:	Mileage:
Seller document/admin fee	\$	VIN:			
Down payment (cash) amount (-)	\$	VEHICLE(S) TO BE TRADED (IF APPLICABLE):			
Down payment (trade) amount (-)	\$	Year:	Make:	Model:	Mileage:
Amount financed	\$	Year:	Make:	Model:	Mileage:

Initials____/____