



Fax to Sclarity
800.518.6804

*Notice: Alimony, child support, or other income need not be revealed if you as the Applicant or Co-Applicant does not choose to have it considered for repaying this loan.

APPLICANT NAME First Middle Last			Birth Date / /		Social Security #	
Current Street Address			City	State	ZIP Code	How long at address? Yrs Mo <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Lease
Previous Street Address if at current address less than 2 years			Previous City	State	ZIP Code	Home Phone:
Mortgage holder or Landlord name & address				Mortgage holder/landlord Phone	Balance \$	Value \$ Pay/mo \$
Nearest Relative not living with you & their address				Phone	Relationship	
Present Employer name & address			Your current job title	How long?	Phone	Total <u>Monthly</u> Income Gross: \$
Previous Employer name & address			Your previous job title	How long?	Phone	Total <u>Annual</u> Income: \$ * Income source:

CO-APPLICANT NAME First Middle Last			Birth Date / /		Social Security #	
Current Street Address			City	State	ZIP Code	How long at address? Yrs Mo <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Lease
Previous Street Address if at current address less than 2 years			Previous City	State	ZIP Code	Home Phone:
Mortgage or Landlord name & address				Mortgage holder/landlord Phone	Balance \$	Value \$ Pay/Mo \$
Nearest Relative not living with you & their address				Phone	Relationship	
Present Employer name & address			Your current job title	How long?	Phone	Total <u>Monthly</u> Income Gross: \$
Previous Employer name & address			Your previous job title	How long?	Phone	Total <u>Annual</u> Income: \$ *income source:

AUTHORIZATION I attest that information in this Application is complete and accurate and that false statements may subject me to criminal penalties. I authorize a full investigation of my credit record by the Dealer and its assigns, including financial institutions and financial services providers, and any creditor or business identified above may release information about its experience with me. I understand that financial institutions will be given a copy of this Application, that they will rely on this information to judge my credit worthiness, and that they will retain this Application and information whether or not this Application is approved. I understand that only individuals who are attempting to secure credit on my behalf will review this information, and that at any time I may discontinue this credit process by notifying the Dealer at the phone number below, or by notifying financial services providers that I speak to during the credit process that I do not want to proceed further.

Applicant's Signature _____ Date _____				Co-Applicant's Signature _____ Date _____			
Callback phone # ()				Callback phone # ()			
Type: Boat Auto RV Trailer	Year	Make	Model/VIN	<input type="checkbox"/> new <input type="checkbox"/> used		Selling price with options & accessories \$	
Type: Boat Motor RV	Year	Make	Model/VIN	<input type="checkbox"/> new <input type="checkbox"/> used		(Add) Taxes \$	
Type: Boat Motor RV	Year	Make	Model/VIN	<input type="checkbox"/> new <input type="checkbox"/> used		(Add) Fees \$	
Trade: Auto Boat Motor RV	Year	Make	Model/VIN	Payoff/Amount Owed \$ _____		(Subtract) Trade Allowance \$	
Payoff owed to				Term of loan desired		(Add) Trade Payoff \$	
Special Instructions						(Subtract) Cash Down \$	
AOK RV		phone 573.374.8113	Fax 573.374.9292	Salesperson		Amount Financed \$	