PLEASE FAX TO 310-830-8882 or EMAIL TO SALES@TRIPLE8AUTOBROKER.COM REFERRED BY:



## MOTOR VEHICLE CREDIT APPLICATION FOR PURCHASE OR LEASE

SECTION A: APPLICANT INFORMATION					
Name		Email Address			
Date of Birth	SSN:	Driver's License			
Home Phone		Cell phone			
Current Home Address		Hov	w long?	Yrs	Mos
Previous Home Address		Hov	w long?	Yrs	Mos
Occupation	Current Employer	Hov	w long?	Yrs	Mos
Employer Address Employer Telephone No.					
Previous Employer Address & Telephone No.  How long?				Yrs I	Mos
Nearest Relative Not Living With Applicant Address & Telephone No.					
Applicant's gross monthly income from employment Amount of other monthly income and source(s)  TOTAL MONTH			\$ \$		
			~		
MORTGAGE OR RENT AMOUNT: \$					
SECTION B: CO-APPLICANT INFORMATION, IF FOR A JOINT ACCOUNT					
Name		Email Address			
Date of Birth	SSN:	Driver's License			
Home Phone Cell phone					
Current Home Address		Но	w long?	Yrs	Mos
Previous Home Address		Но	w long?	Yrs	Mos
Occupation	Current Employer	Но	w long?	Yrs	Mos
Employer Address	Employer Telephone No.				
Previous Employer	Address & Telephone No		ow long?	Yrs	Mos
Nearest Relative Not Living With Applicant Address & Telephone #			ow long:	113	1105
Applicant's gross monthly income from employment \$					
Amount of other monthly income and source(s)		TOTAL MONTHLY I	\$ NCOME\$		
MORTGAGE OR RENT AMOUNT: \$					
ADDITIONAL REFERENCES					
Name	Address	•	Tel. No.		
Name	Address	•	Tel. No.		
I authorize Triple 8 Auto and its dealers and financing affiliates to verify the information provided on this form as to my credit and employment history.					
Cianatura of Applicant		B-1-			
		Date		='	
Signature of Co-Applicant		Date		-	