



# Ford Motor Credit Company

## Business Credit Application

Commercial Prod. Line \_\_\_\_\_

 Joint  Individual

Dealership \_\_\_\_\_

Salesperson \_\_\_\_\_

Date \_\_\_\_\_

**NOTE: Individual, Guarantor or Sole Proprietorship complete this section.**

Individual (Last Name, First Name, Middle Initial)	Date of Birth
--	---------------

Social Security No.	Driver's License No. (State.Exp. Date)	Res. Phone	Bus. Phone
---------------------	--	------------	------------

Present Address: (Number and Street)	City	County	State	Zip Code
--------------------------------------	------	--------	-------	----------

Other Names(s) under which applicant's credit references or history can be found \_\_\_\_\_

Own Home Outright <input type="checkbox"/>	Living with Relatives <input type="checkbox"/>
Buying Home <input type="checkbox"/>	Leasing Renting <input type="checkbox"/> Lived There _____Yrs. _____Mos. Mo. Pymnt. \$_____

Mortgage Holder/Landlord (Name & Address)	Banking Reference	Acct. No. Checking <input type="checkbox"/> Savings <input type="checkbox"/>
---	-------------------	--

Name and address of applicant's nearest relative not in household	Relationship	Home Phone
---	--------------	------------

Name and address of applicant's non-related personal reference known over 1 year	Home Phone
--	------------

Employer/Contractor Name and Address	Contact	Phone	Time on Job
--------------------------------------	---------	-------	-------------

Income	How Long as an Owner/Operator	Nature of Business
--------	-------------------------------	--------------------

*Alimony, child support or separate income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.	* Secondary Income	Source	Gross Monthly Income
---	--------------------	--------	----------------------

Previous Employer/Contractor (if less than 3 years)	Address	Phone	How Long
---	---------	-------	----------

**NOTE: Partnerships or Corporations complete this section.****Corporations or Partnerships submit two year-end financial statements and most current balance sheet and profit/loss on business or current tax return.**Corporation:  S  Non-Profit Organization  Partnership 

Company Name	Trade Name/DBA
--------------	----------------

Type of Business	Yrs. in Business	Inc. in which State	Date Inc.	Tax ID Number
------------------	------------------	---------------------	-----------	---------------

Present Address	City	County	State	Zip Code	Phone
-----------------	------	--------	-------	----------	-------

Principal Name (1)	Title	% Owned
--------------------	-------	---------

Principal Name (2)	Title	% Owned
--------------------	-------	---------

**Business Information: (Check each item that is most applicable to your employment/intended use of vehicle)**

Business       Agricultural       Hazardous       Local       Interstate       Intermediate

**List up to Four Bank and Auto Financing/Leasing Sources**

Financial Institution	Address	Acct. No.	Unpaid Balance	Contact	Phone

**Transaction Information (Dealer to Complete)**

No. Units	New/Used	Year	Make	Series	Term	Price

**Down Payment/Cap Cost Reduction**

Trade In	Amount Owning	Net Trade	Cash Down Payment	Total Down Payment
\$	\$	\$	\$	\$

**California Disclosure**

Applicant, if married may apply for a separate account.

**Ohio Disclosure**

The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law.

**New York Disclosure**

A consumer report may be requested in connection with this application for credit or any further update, renewal or extension of such credit. Upon request, you will be informed whether or not a consumer report was requested and, if a report was requested, you will be informed of the name and address of the agency that provides a report.

**Wisconsin Disclosure**

**Marital Property Agreement Notice**

No provision of any Marital Property Agreement, Unilateral Statement under Section 766.59 Wisconsin Statutes or court decree under Section 766.70 Wisconsin Statutes adversely affects the interest of Ford Credit, prior to the time the credit is granted, is furnished a copy of the agreement, statement of decree or has actual knowledge of the adverse provision when the obligation to Ford Credit is incurred.

For purposes of securing credit from you, I/we certify that the above information is true and complete to the best of my/our knowledge. Applicant(s) further certify that I/we have attained the age of majority. Applicant(s) authorize you to check my/our credit and employment and to provide and/or obtain information about credit experience with me/us.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Joint Applicant: (if joint account) \_\_\_\_\_ Date: \_\_\_\_\_

**Statement of Marital Purpose**

I have applied for credit from (dealer) Fuller Ford Chula Vista for the purpose of purchasing (describe vehicle) \_\_\_\_\_ . The obligation is/is not being incurred in the interest of my marriage or family.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For the purpose of securing credit from you, I certify that the above information is true and complete to the best of my knowledge. Applicant authorizes you to check my credit and employment history and to provide and/or obtain information about credit experience with me.

Applicant Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Joint Applicant Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_