

DEALER \_\_\_\_\_ FAX \_\_\_\_\_ PHONE \_\_\_\_\_

A P P L I C A N T	FIRST NAME			MIDDLE NAME			LAST NAME			
	SOCIAL SECURITY NO.			BIRTHDATE			DRIVER'S LICENSE NO.			
	ADDRESS / APT. OR FLOOR / CITY / STATE & ZIP								YRS. / MOS.	
	(AREA CODE) HOME OR NEARBY PH.			(AREA CODE ) CELL PH.			(AREA CODE) PAGER OR OTHER			
	PREV. ADDRESS / CITY/ STATE & ZIP								YRS. / MOS.	
PREV. ADDRESS / CITY/ STATE & ZIP								YRS. / MOS.		
<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> RELATIVES		MONTHLY PAYMENT \$	NO. OF DEP.	LANDLORD OR MORTGAGE HOLDER NAME & PHONE NO.						
E M P L O Y M E N T	EMPLOYER NAME						(AREA CODE) PH. & EXT.		YRS. / MOS.	
	ADDRESS / CITY / STATE & ZIP						CLOCK OR BADGE NO.			
	OCCUPATION / DEPT. / SUPERVISOR						SALARY \$		WEEKLY <input type="checkbox"/> NAME UNDER WHICH EMPLOYED	
									BIWEEKLY <input type="checkbox"/>	
									MONTHLY <input type="checkbox"/>	
PREV. EMPLOYER NAME / ADDRESS / CITY/ STATE & ZIP						(AREA CODE) PH. & EXT.		YRS. / MOS.		
PREV. EMPLOYER NAME / ADDRESS / CITY/ STATE & ZIP						(AREA CODE) PH. & EXT.		YRS. / MOS.		
Alimony, child support, or separate maintenance income need not be listed unless you choose to have such income considered regarding extension and repayment of the credit requested.										
MONTHLY AMOUNT \$		SOURCE AND AMOUNT OF OTHER INCOME - EXPLAIN								
D A T A	LAST CAR FINANCED YEAR, MAKE & MODEL			FINANCED BY			OWE <input type="checkbox"/> PAID FOR <input type="checkbox"/> MONTHLY PAYMENT \$			
	ARE YOU OBLIGATED TO MAKE ALIMONY OR CHILD SUPPORT PAYMENTS?			YES -OR- NO			MONTHLY AMOUNT?			
	HAVE YOU EVER GONE THROUGH BANKRUPTCY OR CHAPTER 13?			YES -OR- NO			IF YES, WHEN?			
	DO YOU HAVE ANY UNSATISFIED JUDGEMENTS AGAINST YOU?			YES -OR- NO			IF YES, EXPLAIN.			
	ARE YOU A COSIGNER, ENDORSER OR GUARANTOR FOR OTHERS?			YES -OR- NO			IF YES, EXPLAIN.			
SELLING \$ _____			AUTO INFO			TRADE-IN INFO				
INCLUDING SALES TAX \$ _____			MAKE		COLOR		YEAR			
TRADE \$ _____			YEAR		VIN #		MAKE			
CASH \$ _____			BODY STYLE		ODOMETER		TERM			
TOTAL DOWN PAYMENT \$ _____			MODEL		TRADE-IN TITLE		YES OR NO			
BALANCE TO FINANCE \$ _____										

Please indicate:  Married  
 Unmarried (includes single, divorced & widowed)  
 Separated (under decree of legal separation)

If married or separated and spouse is not a co-applicant please provide:  
 Non-applicant spouse's name: \_\_\_\_\_  
 Non-applicant spouse's address: \_\_\_\_\_  
 \_\_\_\_\_

**NOTICE:** No provision of a marital property agreement, a unilateral statement under Section 766.59 Wis. Stats. or a court decree under Section 766.70 Wis. Stats. adversely affects the interest of the creditor unless the creditor, prior to the time credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the creditor is incurred.

**NON-APPLICANT SPOUSE'S WAIVER OF NOTICE:** I agree to waive notice of any extension of credit in connection with this application.

Non-applicant spouse signs (if available) \_\_\_\_\_ Date \_\_\_\_\_

You certify that the foregoing statements are true and complete and made for the purpose of determining your eligibility for credit. You agree that this application shall remain our property whether or not accepted. We are authorized to make all inquiries we deem necessary to verify the accuracy of the statements made herein, and to determine your creditworthiness by procuring consumer reports from consumer reporting agencies and credit information from other financial institutions and extenders of credit, references, present and former employers, merchants, landlords and creditors. We are authorized to answer questions about our credit experience with you. We report all accounts to the credit bureaus. Please contact us if you feel there has been an error.

Your privacy is important to us. You may obtain a copy of the Nationwide Privacy Policy by calling us at 800.622.7605

We are permitted to share information about our transactions with you with other companies affiliated with Nationwide, and, as permitted by law, consumer reporting agencies and other creditors. However, we may not share transaction or other information with affiliated companies for marketing or other purposes if you tell us not to share information (except as otherwise permitted by law). If you do not want information shared for marketing or other purposes, you can notify us by calling 773.777.7600 or by writing to Nationwide, 3435 North Cicero Avenue, Chicago, IL 60641. Please include your name, address and social security numbers so that we can honor this request.

APPLICANT SIGNS \_\_\_\_\_ DATE \_\_\_\_\_