HOME LOAN INVESTMENT BANK®
AUTO LENDING

Dealer Name: _____

Dealer Phone: _____

Rev 1.0-09182014

Automobile Loan Application

Fax completed applications to (888) 424-9070

Applicant's Credit Statement (Please check one and initial)

☐ I intend to apply for individual credit X _____ *Initials*

☐ We intend to apply for joint credit X _____ *Initials* X _____ *Initials*

Applicant Information

PRINT FULL NAME (FIRST, MIDDLE, LAST)

DATE OF BIRTH | SOCIAL SECURITY NUMBER

STREET ADDRESS

CITY / STATE / ZIP

TIME AT ADDRESS _____ Yrs _____ Mos | MONTHLY HOUSING PAYMENT $

RESIDENTIAL STATUS ☐ Own ☐ Rent ☐ Live with Family

HOME PHONE | CELL PHONE

EMAIL ADDRESS

PRIOR ADDRESS (if less than 2 years at present)

Co-Applicant Information

PRINT FULL NAME (FIRST, MIDDLE, LAST)

DATE OF BIRTH | SOCIAL SECURITY NUMBER

STREET ADDRESS

CITY / STATE / ZIP

TIME AT ADDRESS _____ Yrs _____ Mos | MONTHLY HOUSING PAYMENT $

RESIDENTIAL STATUS ☐ Own ☐ Rent ☐ Live with Family

HOME PHONE | CELL PHONE

EMAIL ADDRESS

PRIOR ADDRESS (if less than 2 years at present)

Employment

PRESENT EMPLOYER

TIME AT JOB _____ Yrs _____ Mos | TITLE / OCCUPATION

WORK PHONE | GROSS SALARY $ ☐ Monthly ☐ Yearly

PRIOR EMPLOYER (if less than 1 year at present) | TIME AT PRIOR JOB _____ Yrs _____ Mos

Employment

PRESENT EMPLOYER

TIME AT JOB _____ Yrs _____ Mos | TITLE / OCCUPATION

WORK PHONE | GROSS SALARY $ ☐ Monthly ☐ Yearly

PRIOR EMPLOYER (if less than 1 year at present) | TIME AT PRIOR JOB _____ Yrs _____ Mos

OTHER INCOME NOTE: Income from alimony, child support or separate maintenance need not be disclosed unless you will rely upon it as basis for undertaking / repayment of loan.

OTHER INCOME SOURCE | MONTHLY AMOUNT $

OTHER INCOME SOURCE | MONTHLY AMOUNT $

The information above is true and complete. I/We authorize Home Loan Investment Bank to obtain credit reports and contact/disclose information. I/We understand it is a federal crime to provide incomplete or incorrect information on a loan application.

X _____ _____
Signature of Applicant *Date*

X _____ _____
Signature of Co-Applicant *Date*

Vehicle Information

VIN

YEAR / MAKE / MODEL / TRIM

MILEAGE | OPTIONS

ADDITIONAL OPTIONS

Trade Information

YEAR / MAKE / MODEL

TRADE PAYOFF WITH | BALANCE OWED $

Finance Information

Term Requested: _____ Mos

1. CASH PRICE $ _____
   a. Cash Down - $ _____
   b. Trade - $ _____
   c. Balance Owed $ _____
2. Warranty / GAP $ _____
3. HLIB VSI / Lien Fee $ _____
4. Doc Fee $ _____
5. License, Tags and Reg. $ _____
6. Sales Tax $ _____

TOTAL FINANCED $ **0.00**