

**APPLICANT:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT# \_\_\_\_\_ BIRTH DATE: / /

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOW LONG: \_\_\_\_\_ OWN \_\_\_\_\_ RENT \_\_\_\_\_  
 PREVIOUS ADDRESS: \_\_\_\_\_ PARENTS \_\_\_\_\_ OTHER \_\_\_\_\_ APT# \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOW LONG: \_\_\_\_\_ OWN \_\_\_\_\_ RENT \_\_\_\_\_  
 EMPLOYER: \_\_\_\_\_ PARENTS \_\_\_\_\_ OTHER \_\_\_\_\_

ADDRESS: \_\_\_\_\_ GROSS MO. INCOME \$ \_\_\_\_\_  
 DATE: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

PHONE NUMBER: ( ) \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

PREVIOUS EMPLOYER: \_\_\_\_\_ GROSS MO. INCOME \$ \_\_\_\_\_  
 DATE: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

PHONE NUMBER: ( ) \_\_\_\_\_

**CO-APPLICANT:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT# \_\_\_\_\_ BIRTH DATE: / /

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOW LONG: \_\_\_\_\_ OWN \_\_\_\_\_ RENT \_\_\_\_\_  
 PREVIOUS ADDRESS: \_\_\_\_\_ PARENTS \_\_\_\_\_ OTHER \_\_\_\_\_ APT# \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOW LONG: \_\_\_\_\_ OWN \_\_\_\_\_ RENT \_\_\_\_\_  
 EMPLOYER: \_\_\_\_\_ PARENTS \_\_\_\_\_ OTHER \_\_\_\_\_

ADDRESS: \_\_\_\_\_ GROSS MO. INCOME \$ \_\_\_\_\_  
 DATE: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

PHONE NUMBER: ( ) \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

PREVIOUS EMPLOYER: \_\_\_\_\_ GROSS MO. INCOME \$ \_\_\_\_\_  
 DATE: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

PHONE NUMBER: ( ) \_\_\_\_\_

**OTHER VERIFIABLE INCOME:**

AMOUNT: \$ \_\_\_\_\_ PER MO. HOW LONG \_\_\_\_\_

SOURCE(S): \_\_\_\_\_

Allimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If you do wish to report such income, show amount and type above and indicate whether received under:  
 \_\_\_ court order \_\_\_ written agreement \_\_\_ oral understanding

**SOCIAL SECURITY #:** \_\_\_\_\_ BIRTH DATE: / /

**DEPENDENTS OTHER THAN LISTED BY CO-APP (#)** \_\_\_\_\_ HOME PHONE#: ( ) \_\_\_\_\_

**USE:** \_\_\_ MARRIED \_\_\_ UNMARRIED \_\_\_ SEPARATED  
 PLACEMENT OF MANUFACTURED HOME:  
 \_\_\_ PRINCIPAL RESIDENCE: \_\_\_ SEASONAL  
 LOCATION ADDRESS: \_\_\_\_\_

\_\_\_ PARK \_\_\_ LAND \_\_\_ RELATIVE LAND  
 SPACE RENT \$ \_\_\_\_\_ OR MORT. PAYMENT \$ \_\_\_\_\_  
 AMT. FIN. \$ \_\_\_\_\_ BAL. \$ \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_ PER MO. HOW LONG \_\_\_\_\_

SOURCE(S): \_\_\_\_\_

Allimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If you do wish to report such income, show amount and type above and indicate whether received under:  
 \_\_\_ court order \_\_\_ written agreement \_\_\_ oral understanding

**SOCIAL SECURITY #:** \_\_\_\_\_ BIRTH DATE: / /

**DEPENDENTS OTHER THAN LISTED BY CO-APP (#)** \_\_\_\_\_ HOME PHONE#: ( ) \_\_\_\_\_

**USE:** \_\_\_ MARRIED \_\_\_ UNMARRIED \_\_\_ SEPARATED

\_\_\_ PARK \_\_\_ LAND \_\_\_ RELATIVE LAND  
 SPACE RENT \$ \_\_\_\_\_ OR MORT. PAYMENT \$ \_\_\_\_\_  
 AMT. FIN. \$ \_\_\_\_\_ BAL. \$ \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_ PER MO. HOW LONG \_\_\_\_\_

SOURCE(S): \_\_\_\_\_

Allimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If you do wish to report such income, show amount and type above and indicate whether received under:  
 \_\_\_ court order \_\_\_ written agreement \_\_\_ oral understanding

**CO-APPLICANT**  
 \_\_\_ Sell \_\_\_ Retain \_\_\_ Lease  
 \_\_\_ Other(specify): \_\_\_\_\_

**CREDIT REFERENCES AND ALL OUTSTANDING DEBTS:**

Creditor:	Address:	Account#:	Amt. Fin.:	Balance:	Payment:

**BANKING INFORMATION:**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

\_\_\_ CHECKING \_\_\_ SAVINGS ACCT.# \_\_\_\_\_ BALANCE: \$ \_\_\_\_\_  
 \_\_\_ OTHER \_\_\_\_\_  
 \_\_\_ CHECKING \_\_\_ SAVINGS ACCT.# \_\_\_\_\_ BALANCE: \$ \_\_\_\_\_  
 \_\_\_ OTHER \_\_\_\_\_

**THESE QUESTIONS APPLY TO BOTH APPLICANT & CO-APPLICANT:**

If "yes" answer is given to questions 1 through 4, explain on an attached sheet:

1 Are there any outstanding judgements against you? In the last seven years have you been declared bankrupt?  
 2 Have you had property foreclosed upon of given title or deed in lieu?  
 3 Are you a co-maker or endorser of a note?  
 4 Are obligated to pay allimony, child support, or separate maintenance? If "yes", how much per month?

APPLICANT: \_\_\_\_\_ (YES OR NO)  
 CO-APPLICANT: \_\_\_\_\_ (YES OR NO)

**NEAREST RELATIVE NOT LIVING WITH YOU:**

**Applicant:**  
 NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
 TOWN/CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE#: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

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**Co-Applicant:**  
 NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
 TOWN/CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE#: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

**Voluntary Information for Government Monitoring Purposes:**

The following information is requested by the federal government for certain types of credit transactions related to a dwelling in order to monitor all creditors compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a creditor may discriminate neither on the basis of this information nor on whether you choose to furnish it. However, if you choose no to furnish this information, under federal regulations the creditor is required to note race or national origin and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

**Applicant**

I do not wish to furnish this information.

Race or National Origin:  
 American Indian, Alaskan Native  Black  
 Asian, Pacific Islander  Hispanic  
 White  Other(specify) \_\_\_\_\_  
 Sex:  Male  Female

**Co-Applicant**

I do not wish to furnish this information.

Race or National Origin:  
 American Indian, Alaskan Native  Black  
 Asian, Pacific Islander  Hispanic  
 White  Other(specify) \_\_\_\_\_  
 Sex:  Male  Female

**ADDITIONAL COMMENTS:**

<b><u>FINANCE SPECIFICS:</u></b>	
<b>Retailer:</b> Plattsburgh Housing Outlet, Inc.	<b>Manufacturer:</b> _____
<b>Address:</b> 690 Route #3 Plattsburgh, NY 12901	<b>Model#:</b> _____ <b>Size:</b> _____
<b>Phone#:</b> (518) 563-6250	<b>Serial#:</b> _____ <b>Invoice:</b> \$ _____
<b>Contact:</b> Eric C. LaBounty	<b>Year:</b> _____ <b>New or Pre-owned:</b> _____
<b>Selling Price:</b> \$ _____	<b>Trade-in Information/Description:</b>
<b>Sales Tax:</b> \$ _____	<b>Year:</b> _____ <b>Make:</b> _____
<b>Cash Down:</b> \$ _____	<b>Serial#:</b> _____ <b>Size:</b> _____
<b>Trade Equity:</b> \$ _____	<b>Allowance:</b> \$ _____ <b>Pay-Off:</b> \$ _____
<b>Total Down:</b> \$ _____	<b>Contract Terms:</b>
<b>Other:</b> \$ _____	_____ Months Rated Quoted: _____ %
<b>Amount to Finance:</b> \$ _____	_____ Fixed Rate _____ Variable Rate _____ Step Rate

"YOU" AND "YOUR" MEAN THE APPLICANT AND CO-APPLICANT; "WE", "US" AND "OUR" MEAN THE RETAILER/BROKER, IF ANY, AND CHASE, AND ANY OTHER FINANCIAL INSTITUTIONS LISTED ABOVE

YOU WARRANT THAT THE INFORMATION YOU ARE FURNISHING ABOVE AND ON THE REVERSE SIDE IS TRUE, ACCURATE, SUPPLIED VOLUNTARILY, AND NOT MISLEADING. YOU AUTHORIZE US, AT OUR OPTION, TO CHECK OUR CREDIT AND EMPLOYMENT HISTORIES AND CREDIT REFERENCES; TO DISCUSS THIS APPLICATION AND RELATED INFORMATION WITH YOUR RETAILER/BROKER, IF ANY, NAMED ABOVE; TO ANSWER QUESTIONS ABOUT YOUR CREDIT HISTORY WITH US; AND TO KEEP THIS APPLICATION WHETHER OR NOT IT IS APPROVED. WE MAY OBTAIN CONSUMER CREDIT REPORTS PERIODICALLY FROM ONE OR MORE CONSUMER REPORTING AGENCIES (CREDIT BUREAUS) IN CONNECTION WITH YOUR APPLICATION AND ANY UPDATE, RENEWAL, REFINANCING, MODIFICATION OR EXTENSION OF THE CREDIT. WE OR A AFFILIATE OF OURS MAY OBTAIN ONE OR MORE CONSUMER CREDIT REPORTS ON YOU FROM TIME TO TIME FOR ANY LEGITIMATE BUSINESS PURPOSE. IF YOU ASKE, YOU WILL BE TOLD WHETHER A CREDIT REPORT WAS REQUESTED, AND IF SO, THE NAME AND ADDRESS OF ANY CREDIT BUREAU FROM WHICH WE OR OUR AFFILIATE OBTAINED YOUR CREDIT REPORT. WE MAY ALSO VERIFY YOUR EMPLOYMENT, PAY, ASSETS AND DEBTS. YOU AGREE THAT ANYONE RECEIVING A COPY OF THIS IS AUTHORIZED TO PROVIDE US WITH SUCH INFORMATION.

YOU UNDERSTAND THAT LENDERS EXTENDS CREDIT AT DIFFERENT RATES AND CREDIT TERMS AND AGREE THAT YOU ARE APPLYING FOR AN EXTENSION OF CREDIT AND NOT FOR A PARTICULAR RATE OR PARTICULAR CREDIT TERMS.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_