

Home Improvement Credit Application

PERSONAL

Purchaser 1 Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Years at this address: _____ Years in this area: _____

Purchaser 2 Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Years at this address: _____ Years in this area: _____

Purchaser 1 Birthdate: _____ Purchaser 1 Social Security Number: _____

Purchaser 2 Birthdate: _____ Purchaser 2 Social Security Number: _____

PRESENT EMPLOYMENT

Purchaser 1 Employer: _____ Position: _____

Employer Address: _____

Employer City: _____ State: _____ Zip: _____

Employer Phone: _____ Date Employed (Month/Year): _____

Gross Monthly Income: _____ Net Monthly Income: _____

Purchaser 2 Employer: _____ Position: _____

Employer Address: _____

Employer City: _____ State: _____ Zip: _____

Employer Phone: _____ Date Employed (Month/Year): _____

Gross Monthly Income: _____ Net Monthly Income: _____

PREVIOUS EMPLOYMENT *(If less than 3 years at present employer)***Purchaser 1 Employer:** _____ **Position:** _____**Employer Address:** _____**Employer City:** _____ **State:** _____ **Zip:** _____**Employer Phone:** _____ **How long?** _____**Purchaser 2 Employer:** _____ **Position:** _____**Employer Address:** _____**Employer City:** _____ **State:** _____ **Zip:** _____**Employer Phone:** _____ **How long?** _____**OTHER INCOME****Source:** _____**Monthly Gross:** _____ **Monthly Net:** _____**AUTO****Year:** _____ **Make:** _____ **Model:** _____ **Clear:** _____ **Not Clear:** _____**BANK****Checking (Bank/Location):** _____ **Average Balance:** _____**Savings (Bank/Location):** _____ **Average Balance:** _____**NEAREST RELATIVE** *(Not living with purchaser)***Name:** _____ **Address:** _____ **Phone:** _____**ID INFORMATION** *(Driver's License or State ID Required by the Patriot Act, Section 326)***Type of ID (1):** _____ **State of Issuance:** _____ **ID#:** _____ **Date Issued:** _____ **Exp. Date:** _____**Type of ID (2):** _____ **State of Issuance:** _____ **ID#:** _____ **Date Issued:** _____ **Exp. Date:** _____

By providing your signature below, you are stating that all information is true and complete. You also authorize a full investigation of your credit record and your employment by Advanced Foundation Solutions, LLC, (AFS, LLC) and also authorize AFS, LLC to act as your agent to obtain financing for home improvement and repair.

Signature (1): _____ **Date:** _____**Signature (2):** _____ **Date:** _____