UNIVERSAL LMS FINANCE AND LEASING CORPORATION (FORMERLY UMC FINANCE AND LEASING CORPORATION)

CREDIT APPLICATION

All information will be strict	DATE SUBMITTED	DATE SUBMITTED			CA SOURCE/SALESMAN					
FINANCING	BRAND NEW	BRAND NEW	NAME O	F DEALER/BRANC	Н					
DESIRED	USED CAR OTHER	TRUCK/LUV USED TRUCK/LUV	Ė	USED AUV	NAME OF USER, IF NOT APPLICANT					
PURPOSE		PLACE OF USE			ITEM DE	SCRIPTION (BRA	ND,	MODEL, YEAF	R)	
PRIVATE/PERSONAL	BUSINESS									
PUBLIC UTILITY LIST CASH PRICE	DOWN PAYMENT	AMOUNT FINANCE	-	TERM/MONTHS						
PERSONAL INFORMAT	ION				12	18 24		36	48	60
LAST NAME	FIRST NAME	MIDDLE NAME		DATE OF BIRTH		AGE		MALE		FEMALE
ADDRESS			-	TEL./CONTACT NO(S).				OWN HOME	_	RENT/BOARD
EDUCATION	HIGH SCHOOL	COLLEGE		POST GRADUATE			L	SINGLE MARRIED		SEPARATED WIDOWED
NAME OF SPOUSE/CO-MAK	ER			DATE OF BIRTH		AGE		MALE		FEMALE
ADDRESS			-	TEL./CONTACT NO(S).				OWN HOME	_	RENT/BOARD TS
NAME OF DEPENDENTS			,	SCHOOL			•	GRADE/YEA	R/COL	JRSE
2										
3										
5										
OCCUPATION / EMPLO										
NAME OF EMPLOYER/BUSINESS (IF SELF-EMPLOYED)			-	OWNER/PROPRIETOR IF EMPLOYED, POSITION				YEAR'S OF STAY/OPERATION		
EMPLOYMENT/BUSINESS ADDRESS				NATURE OF BUSINESS						D(S).
SPOUSE'S/CO-MAKER'S EMPLOYER/BUSINESS (IS SELF-EMPLOYED)			-	OWNER/PROPRIETOR IF EMPLOYED, POSITION	YEAR'S OF STAY/OPERATION					
EMPLOYMENT/BUSINESS A	DDRESS			NATURE OF BUSINESS				TEL./CONTA	CT NO	D(S).
ASSTES, INCOME AND	EXPENSES									
OWN A CAR/VEHICLE		TO WHOM MORTGAGED)	MONTHLY INCOME				OTHERS (PL	S. SP	ECIFY)
YES	MORTGAGED			APPLICANT(S)			_			
NO OWN REAL ESTATE	COMPANY CAR	TO WHOM MORTGAGED	1	SPOUSE/CO-MAKER(S) MONTHLY EXPENSES			T	OTHERS (PL		ECIEV)
YES	MORTGAGED	TO WHOM MORTGAGED	,	LIVING/EDUC.			L	JOTHERS (FI	.J. JF	EGIFT)
NO				AMORT./RENTAL				TAL EXPENS		
NAME, ADDRESS AND NATU	JRE OF OTHER SOURCES	OF INCOME					T	OTAL NET INC	OME	
CREDIT AND BANK FAC	CILITIES									
TYPE BANK/FINANCIAL INSTITU			IOITU	N, BRANCH/ADDRESS	DEPOSIT/CREDIT INFORMATION DEPOSIT				ORMATION	
SAVINGS ACCOUNT/ TIME DEPOSIT								ALANCE	_	
CHECKING ACCOUNT								UTSTANDING	BALA	NCE
CREDIT CARD							L	FULL PAYMI		
LOANS/CREDIT						AMORTIZAT		•	TIVIEN	1
FACILITIES						OUTSTAND AMORTIZAT				
	NEO (NEADEOT DEL ATI)	75 NOT I N/NO W/TI VOI				OUTSTAND	NG	BALANCE		
NAME	ES (NEAREST RELATIV	RELATIONSHIP		ADDRESS				TEL./CONTA	CT NO	D(S).
23										
TRADE REFERENCES (FOR BUSINESS/IF SELF	F-EMPLOYED)								
NAME OF CLIENT(S) & S	UPPLIER(S)			CONTACT PERSON(S)				TEL./CONTA	CT NO	D(S).
2										
3										
5										
AND LEASING CORPORATION TO	OBATAIN SUCH INFORMATION RELATIVE TO THIS APPLICATION. A	IN THIS APPLICATION ARE CORREC AS THEY MAY REQUIRE CONCERNII NY MISREPRESENTATION ON MY PA	NG TH	E STATEMENTS MADE IN THIS APPLIC	CATION AND	THAT THE SOURCES	FRO	N WHICH YOU M	1AY VE	RIFY ARE AUTHORIZED
. SOKEROLEKTI WILLIILK ITE CI	ALEST TO GIVE EVEN ON THOSE									
-	SIGNATURE									