

TCC CONSUMER CREDIT APPLICATION

Dealer Name _____ Dealer # _____



Please check the appropriate boxes and complete the applicable sections. Note: Applicant, if married, may apply for separate account.

- INDIVIDUAL CREDIT – relying solely on my income or assets.
- INDIVIDUAL CREDIT – relying on my income or assets as well as income or assets from other sources.
- JOINT CREDIT – with spouse.
- JOINT CREDIT – with _____, whose separate credit application is attached.

Will the unit be titled in the name of a business entity? If yes, please indicate type, name of entity and state (check the box with blank for details):

Trust, Corporation, Partnership, Limited Liability Company Name of entity _____ State _____

SECTION A. Information regarding Individual Applicant: **SECTION B. Information regarding Joint Applicant or Other Party: Complete only if application is for joint credit or for individual credit relying on income or assets from other sources.**

FIRST NAME (PRINT)				INITIAL	HOME PHONE	FIRST NAME (PRINT)				INITIAL	HOME PHONE	
LAST NAME			SUFFIX	SOCIAL SECURITY # / TAX ID #		LAST NAME			SUFFIX	SOCIAL SECURITY # / TAX ID #		
ADDRESS				APT #	CELL PHONE	ADDRESS				APT #	CELL PHONE	
CITY		STATE	ZIP	TIME AT ADDRESS? ____ YRS ____ MOS	DOB	CITY		STATE	ZIP	TIME AT ADDRESS? ____ YRS ____ MOS	DOB	
EMPLOYER			OCCUPATION			EMPLOYER			OCCUPATION			
CITY		STATE	ZIP	BUSINESS PHONE		CITY		STATE	ZIP	BUSINESS PHONE		
EMPLOYMENT STATUS			<input type="checkbox"/> SELF EMPLOYED		HOW LONG? ____ YRS ____ MOS	# OF DEPENDENTS		EMPLOYMENT STATUS			<input type="checkbox"/> SELF EMPLOYED	
<input type="checkbox"/> UNEMPLOYED <input type="checkbox"/> RETIRED <input type="checkbox"/> MILITARY								<input type="checkbox"/> UNEMPLOYED <input type="checkbox"/> RETIRED <input type="checkbox"/> MILITARY				
DRIVERS LICENSE #		D.L. STATE / EXP		MARITAL STATUS		DRIVERS LICENSE #		D.L. STATE / EXP		MARITAL STATUS		
				<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED						<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED		
HOUSING STATUS: <input type="checkbox"/> OWN / BUY <input type="checkbox"/> FULLTIMER <input type="checkbox"/> RENTING			\$		Monthly Payment	HOUSING STATUS: <input type="checkbox"/> OWN / BUY <input type="checkbox"/> FULLTIMER <input type="checkbox"/> RENTING			\$		Monthly Payment	
<input type="checkbox"/> LIVE WITH OTHERS <input type="checkbox"/> OWN FREE & CLEAR			\$		Property Value	<input type="checkbox"/> LIVE WITH OTHERS <input type="checkbox"/> OWN FREE & CLEAR			\$		Property Value	
MONTHLY INCOME		OTHER INCOME / SOURCE*		TOTAL MONTHLY INCOME		MONTHLY INCOME		OTHER INCOME / SOURCE*		TOTAL MONTHLY INCOME		
\$		\$		\$		\$		\$		\$		

*Alimony, child support or separate maintenance income need not be revealed if you do not wish it to be considered as a basis for repaying this obligation.

PREVIOUS RESIDENT ADDRESS			CITY	STATE	TIME AT ADDR? ____ YRS ____ MOS	PREVIOUS RESIDENT ADDRESS			CITY	STATE	TIME AT ADDR? ____ YRS ____ MOS
PREVIOUS EMPLOYER			PREVIOUS OCCUPATION		PHONE	PREVIOUS EMPLOYER			PREVIOUS OCCUPATION		PHONE
PREVIOUS EMPLOYER CITY		STATE	ZIP	PREV EMP PHONE	HOW LONG? ____ YRS ____ MOS	PREVIOUS EMPLOYER CITY		STATE	ZIP	PREV EMP PHONE	HOW LONG? ____ YRS ____ MOS
NEAREST RELATIVE OR PERSONAL REFERENCE			RELATIONSHIP		PHONE	NEAREST RELATIVE OR PERSONAL REFERENCE			RELATIONSHIP		PHONE
NEAREST RELATIVE ADDRESS			CITY	STATE	ZIP	NEAREST RELATIVE ADDRESS			CITY	STATE	ZIP

SECTION C. Deal Structure (To be completed by the dealer) **Purchase Information**

Cash Selling Price	\$	Model Year	_____	<input type="checkbox"/> NEW Mfg. Invoice	Have you ever had any property repossessed in the last 7 years? <input type="checkbox"/> YES <input type="checkbox"/> NO
Sales Tax	\$	Manufacturer	_____	\$	
Doc Fee	\$	Model / Length	_____	<input type="checkbox"/> USED Book Value	Have you ever applied for credit under another name? <input type="checkbox"/> YES <input type="checkbox"/> NO
License	\$	Term of Loan	_____	\$	
Service Contract	\$	Trade-in Information			If yes, what name? _____
Cash Down	\$	Lien Holder	_____	Do you have any lawsuits pending against you?	
Trade Allowance	\$	Monthly Payment	\$	<input type="checkbox"/> YES <input type="checkbox"/> NO	Military Reserves? <input type="checkbox"/> YES <input type="checkbox"/> NO
Trade Pay-off	\$	Year	_____	<input type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE	
Net Trade	\$	Manufacturer	_____	Have you ever filed bankruptcy, or is a bankruptcy proceeding in progress or expected? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Total Down	\$	Model	_____		
Amount Financed	\$	Book Value	\$		

STATE SPECIFIC DISCLOSURES: California Residents: As required by law, you are hereby notified that a negative credit report reflection on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligations. Maine, New York, Rhode Island & Vermont Residents: You authorize us to obtain consumer reports from consumer reporting agencies in considering this application and subsequently in connection with any update, renewal, extension of credit, of a review or collection of your account. At your request, you will be informed whether such a report was requested and, if so, the name and address of the agency that furnished the report. Ohio Residents: The Ohio laws against discrimination require that all creditors make credit available to credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. Married Wisconsin Residents: You acknowledge that any obligation incurred in connection with this application is incurred in the interest of your family or marriage. No provision of a marital property agreement, a unilateral statement under section 766.59 or a court decree under Section 766.70 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 position when the obligation to the creditor is incurred. Washington Residents: Please let us know if we should investigate your credit references and/or credit history under another name. Washington state law against discrimination prohibits discrimination in credit transactions because of race, creed, color, national origin, sex or marital status.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Representations, Warranties, Authorizations, and Agreements: The undersigned applicant(s) 1) warrant and represent to Thor Credit Corporation ("TCC") that the information furnished above is truthful, accurate, and supplied voluntarily; 2) authorize TCC to: i) check their credit and employment histories, and bank and personal references; ii) obtain consumer reports from consumer reporting agencies in considering this Application and subsequently in connection with any update, renewal, extension of credit, review or collection of their account (if credit is granted); iii) report to others their credit experience with TCC and to answer questions about their credit experience with TCC (in accordance with applicable law); and iv) keep this application whether or not it is approved; and 3) agree to notify TCC of any material change of the information provided above.

JOINT APPLICANT'S SIGNATURE MEANS THE APPLICANT AND JOINT APPLICANT INTEND TO APPLY FOR JOINT CREDIT.

X _____ Date

X _____ Date