

Dealer Application



DEALER NAME: _____ PHONE: (_____) _____

ADDRESS: _____ FOR _____ YEARS

PREVIOUS ADDRESS: _____ FOR _____ YEARS

BUSINESS LICENSE #: _____ CITY: _____ COUNTY: _____

TYPE OF BUSINESS: _____ DATE OPENED: _____

OWNERSHIP: SOLE OWNER* PARTNERSHIP CORPORATION LLC

*IF SOLE OWNER OR PARTNERSHIP, IS TRADE STYLE REGISTER? YES NO

PRINCIPALS:

NAME: _____ TITLE: _____ SS #: _____ - _____ - _____ DATE OF BIRTH: ____ / ____ / ____

HOME ADDRESS: _____

NAME: _____ TITLE: _____ SS #: _____ - _____ - _____ DATE OF BIRTH: ____ / ____ / ____

HOME ADDRESS: _____

NAME: _____ TITLE: _____ SS #: _____ - _____ - _____ DATE OF BIRTH: ____ / ____ / ____

HOME ADDRESS: _____

TRADE REFERENCES:

NAME: _____ PHONE NUMBER: (_____) _____ ADDRESS: _____

NAME: _____ PHONE NUMBER: (_____) _____ ADDRESS: _____

NAME: _____ PHONE NUMBER: (_____) _____ ADDRESS: _____

MORTGAGE HOLDER / LANDLORD: _____ PHONE NUMBER: (_____) _____

AMOUNT MONTHLY MORTGAGE / RENT PAYMENT: _____ LEASE: YES NO

YOUR BANK: _____ PHONE: (_____) _____

ANNUAL VOLUME / CONTRACTS: _____ AVERAGE SIZE CONTRACTS: \$ _____

MARKET AREA: _____

TYPE OF PRODUCT WARRANTY: _____

DEALER NAME: _____ SIGNATURE: _____

SIGNATURE: _____

SIGNATURE: _____

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SOLE OWNER OR PARTNERSHIP

Credit Bureau Authorization: I/We, the undersigned, hereby authorize Volunteer Lenders Inc., to make any inquiries that Volunteer Lenders Inc. may find necessary in connection with our application. This may include (but is not limited to) inquiries through any and/or all credit reporting agencies as necessary to verify the accuracy of the information and statements made to Volunteer Lenders, Inc. You may verify information on our application including income, assets and liabilities, other existing mortgages, and any other documents required in connection with obtaining and maintaining the Sales Finance/Dealer relationship.

This authorization also applies to inquiries regarding employment history, bank account, and follow-up credit inquiries/checks that Volunteer Lenders Inc. May find necessary in the future connection with the servicing of our relationship. I/We further authorize Volunteer Lenders Inc to communicate my/our information to any necessary third party as needed to process my/our application via any available medium including but not limited to email, fax and mail. These statements are made for the purpose of obtaining a Sales Finance/Dealer relationship. I/We understand that false statements may result in fines or imprisonment, or both under the provision of Title18, United States Code, Section 1001.

DEALER NAME: _____ SIGNATURE: _____

SIGNATURE: _____

SIGNATURE: _____

PARIS OFFICE

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P.O. Box 3
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UNION CITY OFFICE

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