

Horn Ford Credit Application

666 West Ryan (Highway 10 West) · Brillion, WI 54110 · 1.800.261.4676

Fax: 920.756.2117

Applicant	Name _____ SS# _____ - _____ - _____ DOB ____/____/____ <small>First Middle Last</small>
	Address _____ City _____ St _____ Zip _____
	Phone () _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own How Long _____
	Mrtg. Holder _____ Monthly Payments _____
Previous Address _____ City _____ St _____ Zip _____	
Employment	Nearest Relative & Address _____ Phone () _____
	Employer & Address _____ Years _____ Months _____
	Phone() _____ Monthly Income \$ _____ Title _____
	Source of Additional Income _____ Amount \$ _____ Total Gross Income \$ _____
Previous Employer & Address _____ Title _____	
How Long _____	
Co-Applicant	Name _____ SS# _____ - _____ - _____ DOB ____/____/____ <small>First Middle Last</small>
	Address _____ City _____ St _____ Zip _____
	Phone () _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own How Long _____
	Mrtg. Holder _____ Monthly Payments _____
Previous Address _____ City _____ St _____ Zip _____	
Employment	Nearest Relative & Address _____ Phone () _____
	Employer & Address _____ Years _____ Months _____
	Phone() _____ Monthly Income \$ _____ Title _____
	Source of Additional Income _____ Amount \$ _____ Total Gross Income \$ _____
Previous Employer & Address _____ Title _____	
How Long _____	
Bank: _____	
<input type="checkbox"/> Checking <input type="checkbox"/> Savings Credit References: _____	
Consumer Notice	
By signing this credit application: I/We make the above representation, which are certified true, correct and complete for the purpose of obtaining credit and I/we authorize you to investigate my credit report, to verify my credit, employment and income references and to gather such other information that you consider necessary and appropriate. I/We understand that you will retain this application whether or not it is approved. I have the right to ask for the name and address of the	

consumer reporting agency which gave the consumer report.

_____ Date _____ Date _____
Applicant Signature Co-Applicant Signature

New Used

Year _____ Make _____ Model _____

Eng. Make _____ Year _____ HP _____ Eng. Make _____ Year _____ HP _____

Trailer _____ Year _____ **Invoice** _____

Selling Price \$ _____ Sales Tax \$ _____ SVC. Contract \$ _____ Net Trade \$ _____

Cash Down \$ _____ Total Down Payment \$ _____ Amt. Financed \$ _____

Trade

Make _____ Model _____ Yr _____

Payoff _____ To Whom _____ Acct # _____

For Office Use Only