

# Elk City Outdoor Credit Application

2222 West 3<sup>rd</sup> St · Elk City, OK 73644 · 1.877.243.2485

Fax: 580.243.2485

<b>Applicant</b>	Name _____ SS# _____ - _____ - _____ DOB ____/____/____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>First</span> <span>Middle</span> <span>Last</span> </div> Address _____ City _____ St _____ Zip _____ Phone (    ) _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own How Long _____ Mrtg. Holder _____ Monthly Payments _____ Previous Address _____ City _____ St _____ Zip _____
<b>Employment</b>	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 _____
<b>Co-Applicant</b>	Name _____ SS# _____ - _____ - _____ DOB ____/____/____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>First</span> <span>Middle</span> <span>Last</span> </div> Address _____ City _____ St _____ Zip _____ Phone (    ) _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own How Long _____ Mrtg. Holder _____ Monthly Payments _____ Previous Address _____ City _____ St _____ Zip _____
<b>Employment</b>	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: _____
	<b>Consumer Notice</b> 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 # \_\_\_\_\_

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