

Attention:

LO License No:

Email:

LA: _____		current rent: \$\$ _____		Date: _____		LO: _____	
<b>(A) APPLICANT INFORMATION</b>				<b>(B) CO-APPLICANT INFORMATION</b>			
FULL NAME-Last, First, Middle			No. Dependents: _____ List ages: _____	FULL NAME-Last, First, Middle			No. Dependents: _____ List ages: _____
BIRTHDATE:		SOCIAL SECURITY #		BIRTHDATE:		SOCIAL SECURITY #	
MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed)				MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed)			
PRESENT STREET ADDRESS (5 Year Residence Required)				PRESENT STREET ADDRESS (5 Year Residence Required)			
CITY, STATE, ZIP CODE			COUNTY	CITY, STATE, ZIP CODE			COUNTY
HOW LONG AT PRESENT ADDRESS: _____ Years _____ Months			HOME PHONE #	HOW LONG AT PRESENT ADDRESS: _____ Years _____ Months			HOME PHONE #
RESIDENTIAL STATUS? <input type="checkbox"/> Homeowner <input type="checkbox"/> Renter <input type="checkbox"/> Parents <input type="checkbox"/> Other/ Selling				RESIDENTIAL STATUS? <input type="checkbox"/> Homeowner <input type="checkbox"/> Renter <input type="checkbox"/> Parents <input type="checkbox"/> Other			
PREVIOUS ADDRESS (If less than 5 years at present)			How Long: _____ Yrs _____ Mos.	PREVIOUS ADDRESS (If less than 5 years at present)			How Long: _____ Yrs _____ Mos.
<b>Applicant's Employment (Minimum 3 year History)</b>				<b>Co-Applicant's Employment (Minimum 3 year History)</b>			
EMPLOYER			PHONE ( ) -	EMPLOYER			PHONE ( ) -
EMPLOYER'S ADDRESS			TYPE OF BUSINESS	EMPLOYER'S ADDRESS			TYPE OF BUSINESS
POSTION	SUPERVISOR	DATE EMPLOYED		POSTION	SUPERVISOR	DATE EMPLOYED	
GROSS SALARY/MTH	GROSS OTHER INCOME	SOURCE		GROSS SALARY/MTH	GROSS OTHER INCOME	SOURCE	
PREVIOUS EMPLOYER			PHONE ( ) -	PREVIOUS EMPLOYER			PHONE ( ) -
CITY, STATE	POSITION	EMPLOYED FROM: _____ TO: _____		CITY, STATE	POSITION	EMPLOYED FROM: _____ TO: _____	
<b>CREDIT REFERENCES AND PAYMENT OBLIGATIONS</b>							
COMBINED PAYMENTS FOR ALIMONY _____ CHILD SUPPORT _____ CHILD CARE _____							
HAVE EITHER OF YOU A BANKRUPTCY, REPOSSESSION, OR JUDEMENT IN THE LAST 10 YRS? <input type="checkbox"/> YES <input type="checkbox"/> NO							
CHECKING ACCOUNT WITH				SAVINGS? TYPE <input type="checkbox"/> SAVINGS ACCT <input type="checkbox"/> 401K <input type="checkbox"/> RETIREMENT PENSION WITH:			
LAST VEHICLE, TRUCK, OR MOBILE HOME FINANCED BY				YEAR: _____	MTHLY PMT	PRESENT BAL	
				MAKE: _____			
				MODEL: _____			
<b>APPLICANT'S RELATIVE</b>				<b>CO-APPLICANT'S RELATIVE</b>			
NEAREST REALTIVE NOT LIVING WITH YOU			HOME PHONE # ( ) -	NEAREST REALTIVE NOT LIVING WITH YOU			HOME PHONE # ( ) -
RELATIONSHIP		ADDRESS		RELATIONSHIP		ADDRESS	
IN ADDITION TO YOUR MOBILE HOME, WHAT ELSE DO YOU WANT TO INCLUDE IN THIS LOAN? <input type="checkbox"/> Land <input type="checkbox"/> Home Improvements <input type="checkbox"/> Credit Card Consolidation <input type="checkbox"/> Home Owners Insurance <input type="checkbox"/> Other: _____							

**NOTICE**

The Federal Equal Opportunity Credit Act prohibits creditors from discriminating on the basis of sex or marital status. The Federal Agency, which administers compliance with the law concerning this retailer, is the Federal Trade Commission, Washington, D.C. 20580.

**VOLUNTARY INFORMATION FOR THE GOVERNMENT MONITORING PURPOSES**

If you are applying to refinance a mobile home, which will secure credit and be occupied as your principle residence, the following information is requested by the Federal Government to monitor the creditor's compliance with the anti-discrimination laws, including the Equal Opportunity Law. The law provided that a creditor may neither discriminate on the basis of this information nor on whether or not it is furnished. Furnishing all or any part of this information is optional. If you choose not to provide this information, the law requires the creditor to note your race or national origins and sex on the basis of visual observation or surname. If you do not wish to furnish any of the following information, please initial below.

**APPLICANT**

I do not wish to furnish this information (initials): \_\_\_\_\_  
 White  Black  American Indian or Alaskan Native  Hispanic  
 Asian or Pacific Islander  Other  
 SEX:  Male  Female

**CO-APPLICANT**

I do not wish to furnish this information (initials): \_\_\_\_\_  
 White  Black  American Indian or Alaskan Native  Hispanic  
 Asian or Pacific Islander  Other  
 SEX:  Male  Female

By signing below, you give you permission to any financial institution listed below to investigate your credit and employment history and you authorize release of all credit-related information to those institutions. You also agree to inquire about the status of you credit application by contacting the financial institutions named above and understand that this application may be withdrawn if you do not inquire about its status within 30 days of this notice.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Co-Applicant's Signature**

\_\_\_\_\_  
**Date**

LOAN SUBMISSION WORKSHEET

Lead Source: \_\_\_\_\_ Referred by: \_\_\_\_\_  
Application Taker: \_\_\_\_\_ Originator: \_\_\_\_\_ Key #: \_\_\_\_\_  
Customer Names: \_\_\_\_\_ Spoke w/: \_\_\_\_\_ Best time to call: \_\_\_\_\_  
Year: \_\_\_\_\_ Width: \_\_\_\_\_ Length: \_\_\_\_\_ Mfgr: \_\_\_\_\_ Model: \_\_\_\_\_  
NADA Base x130% = \_\_\_\_\_

CUSTOMER ASSETS

List assets of customer, including other land, 401k, other cash accounts, vehicles, stocks/bonds, mutual funds, other valuable

\* \_\_\_\_\_ \*  
\* \_\_\_\_\_ \*  
\* \_\_\_\_\_ \*  
\* \_\_\_\_\_ \*  
\* \_\_\_\_\_ \*

DEALER / CONTACT INFORMATION

Name: Evangeline Home Center. City & State: **Carencro, LA**  
Contact Person: \_\_\_\_\_ Phone: ( **337** ) **896** – **1773**

HOME LOCATION INFORMATION

Where is the home currently located – or – Where will it be located?  
Does the customer own the land?  Yes  No Tax Appraisal Value: \_\_\_\_\_  
Land Pmt/ Lot Rent: \_\_\_\_\_ per month  
When was the land purchased?  
Is the Land financed?  Yes, with mobile home  Yes, separate loan  No  
Whose name(s) is/are on the customer's deed?  
What was the land purchase price?  
Who is the lender for the land loan?  
Will the customer consider a Land/Home combination?  Yes  No

REQUESTED LOAN TERMS

Home Only MFG Invoice: \_\_\_\_\_  
 Home and Land \_\_\_\_\_

A. Purchase of Home	_____	Optional equipment / services	Costs:
B. Taxes	_____	1.	_____
C. Title	_____	2.	_____
D. Insurance	_____	3.	_____
E. Land	_____	4.	_____
F. Improvements	_____	5.	_____
1. other:	_____	6.	_____
2. total before down payment	_____	7.	_____
3. Down Payment	_____	8.	_____
4.	_____	9.	_____
	_____	10.	_____

Total Amount to finance: \_\_\_\_\_

Estimated Total Loan Amount : \_\_\_\_\_

Did you request Purchase Agreement or Installment Contract + 30 day written payoff?  Yes  No

In the spaces below, provide your credit manager with any additional information that will be helpful in understanding this transaction:

DL#	Issue Date:	Expir Date:
DL#	Issue Date:	Expir Date: