Cure 124 MILLER CTATE ADDITIONAL Conditions of according to the condition of the condition																
Acceptance  MULTI-STATE APPLICATION - Credit reports may be obtained in connection with your application.  IMPORTANT NOTICE: To obtain a copy of the Credit Application Corporation Privacy Policy, please call toll-free 877-288-6357																
Application Type: Individual Joint for Dealer Lot #													_ot#			
Customer Information and Physical Address (Complete a separate application for applicant and joint applicant)																
SSN				DOB	//	<u> </u>			If you desinoose one:	re, Mr Mrs [	☐ Ms Maide	n Name				
First Name	Name MI Last Name Sr Jr															
Street Number			Street 1	Name							Apt		Prii	mary Driv	er Ye	es No
City State Zip Code																
Primary Phone				Extension		Cell**	Home	e		Email**						
Secondary				Extension		☐Cell**	Home	e	Other	Email**						
Phone	Extension Cell** Home Work Other Email**															
Phone	Extension Cell** Home Work Other Email**															
Phone Extension Cell** Home Work Other Email**																
Vehicle Insurer Name Insurer Phone Make Credit Acceptance loss payee/lienholder																
Policy # Agent Driver License # Plate #																
	ddress (	(if different the	an current resider	псе)			7						7		1	
Street Number		Street Nar	me				Apt		City				State		Zip Code	
Previous Street	Address	Street Nar					] ,,,,		City				State		Zip Code	
Number Residence	ce Inform						Apt						State		Zip Code	
Residence Owned By:		Spouse L	_andlord	itary At R	esidence											
Savings	Checkin		ime													
Landlord N								F	Phone					Exten	sion	
Street Number		Street Nar	me				Apt		City			<u> </u>	State		Zip Code	
Primary I								d not be re	evealed if yo	ou do not wis	th to have it consi	dered as a bas	is for rep	aying this	obligation)	
Income																
Monthly Pay \$ Start/Hire / / / / / / / / / / / / / / / / / / /																
Employer N	lame							Occupation								
Street Number		Street Nar	me				Ste#		City				State		Zip Code	
Employment Verification Phone Extension																
Physical Work Location Name Physical Work Location Phone Extension																
Street Number		Street Nar	me				Ste#		City				State		Zip Code	
Secondary Income Information (Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)																
Income																
Monthly Pay \$ Start/Hire / / / / _ /																
Employer Name Occupation																
Street Number		Street Nar	me				Ste#		City				State		Zip Code	
Employmen Phone	Employment Verification Phone Extension															
Physical Work Location Name Physical Work Location Phone Extension																
Street		Street Nar	me				Ste#		City				State		Zip Code	



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First Name						мі	Last N	ame							]III   IV
Third Income Information (Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)															
Income   Employee (Gets W2)   Fixed Income   Unemployed   Cash Income   Self Employee (No W2)   Temp Service Employee															
Monthly Pay \$ Start/Hire / / / /															
Employer Name Occupation															
Street Number Street Name Ste# City State Zip Code													de		
Employme Phone	mployment Verification Extension														
Physical Work Location Name Physical Work Location Phone Extension													on		
Street Number		Street Nam	ne				Ste#		City				State	Zip Co	de
STATE SPECIFIC DISCLOSURES															
CALIFORNIA APPLICANTS: If you are married, you may apply for a separate account.															
OHIO APPLICANTS: The Ohio laws against discrimination require that all creditors make credit equally available to all 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.															
WISCONSIN RESIDENTS: Notice to married applicants: No provision of any marital property agreement, a unilateral statement under Wis. Stat. § 766.59 or a court decree under Wis. Stat. § 766.70 adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the creditor is incurred. The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand that the creditor may be required by law to give notice of															
the credit transaction to my spouse.															
SPOUSAL CONSENT															
By signing below I authorize and give consent to Credit Acceptance to discuss my account with my spouse, if applicable, including discussing my account activity, status and payment arrangements.															
**EMAIL AND CELLULAR COMMUNICATION CONSENT  I authorize and give express consent to Credit Acceptance, in order to administer and service my account or to collect any amounts I may owe, to: (a) monitor or record telephone calls made to me regarding my account to assure quality of service or for other reasons; (b) use prerecorded/artificial voice messages, text messages and/or automatic dialing equipment to contact me while servicing or collecting my account, as the law allows; and, (c) if I provide an email address in this credit application, or if I later give you an email address, Credit Acceptance may contact me regarding my account at the email address(es) I provide.															
I further consent and agree that Credit Acceptance, in order to administer and service my account or to collect any amounts I may owe, may use prerecorded/artificial voice messages, text messages and/or automatic dialing equipment to contact me at any telephone number belonging to me, including any that I provide, whether on this credit application or in the future, even if the number is a telephone number associated with a cellular phone or other wireless device and/or using the telephone number results in a charge to me. By giving Credit Acceptance a telephone number, I represent that I am the subscriber and/or primary user of that telephone number and have the authority to consent to regularly receive calls at such number.															
I understand I can revoke my consent any time.															
CONSENT TO CREDIT REVIEW															
I acknowledge that pursuant to the Fair Credit Reporting Act, my application will be submitted to Credit Acceptance Corporation, a Michigan corporation, and/or any of its affiliates or subsidiaries or divisions ("Credit Acceptance") for review with the assignment of a sales finance contract written, or to be written, in connection with my purchase.															
By signing below, I certify that the above information is true and complete to the best of my knowledge and confirm the authorizations and consents given above. I understand and acknowledge that Credit Acceptance will retain this application whether or not it is approved. Credit Acceptance is authorized to review my credit history and verify my employment.															
I also understand and acknowledge that if I ask, I will be informed if a credit report has been requested in connection with this application for credit, and the name and address of the Credit Reporting Agency that furnished the report.															
Applic	ant Signat	ture					_	Date							
Applicant Signature Date															