

ECONOMY FURNITURE CO.

CREDIT APPLICATION

Amount of credit applying for _____

Salesperson _____

APPLICANT'S INFORMATION Type of account applying for Joint Individual

Applicant's Name _____

Street Address _____
First Middle Last
Buying Renting

City: _____ State _____ Zip: _____ Home Phone# _____

Cell Phone # _____ Social Security # _____

Date of Birth _____ Drivers License # _____ State Issued _____

E-Mail Address _____

I would like to receive email announcements about special offers Yes ___ No ___

Length of time at current residence: _____ If less than 1 year provide previous address

Previous address: _____ City: _____ State: _____ Zip: _____

Employer: _____ How long: _____ Position _____

Employer City _____ State: _____ Phone: _____ Monthly Income _____

Nearest Relative not living with you: _____ Phone: _____

Address _____ Relationship _____

CO-APPLICANT'S INFORMATION (ONLY IF JOINT ACCOUNT)

Name _____ Relationship to Applicant _____

Address (If different than Primary Applicant) _____

Social Security # _____ Date of Birth _____

Drivers License # _____ State Issued _____

Employer _____ How long _____ Position: _____

Employer City _____ State _____ Phone _____ Monthly Income _____

*You do not have to tell us about alimony, child support, or separate maintenance income unless you want us to consider them in approving your application

PLEASE SIGN TO COMPLETE YOUR CREDIT APPLICATION

Everything that I have stated in this application is correct to the best of my knowledge. I understand that all applications are subject to credit approval and you will retain this application whether or not it is approved. You and any credit agent* you send this application to are authorized to check my credit and employment history. You and any credit agent* may also secure follow-up credit reports and answer questions about your credit experience with me. I understand you may ask me for more information, if necessary, to help you make a credit decision. *Credit agent refers to **American General Finance** and/or **1st Franklin Financial** _____.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

Application approved by _____ Account # _____ Credit Limit _____

Application denied by _____