



# CUSTOMER APPLICATION

MMCA Dealer #: 

or

Dealer Name: APP#: 

(For Internal Use Only)

 RETAIL     BALLOON     LEASE

Individual Credit - applying for credit in your own name and relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested.

Joint Credit - applying for joint credit with another person. Relationship to applicant:     Spouse     Non-Spouse

Individual Credit - applying for credit in your own name but relying on income from alimony, child support, or separate maintenance, or on the income or assets of another person as the basis for repayment of the credit requested.

**SECTION A: PRIMARY APPLICANT INFORMATION:**

|   |  |                             |  |   |
|---|--|-----------------------------|--|---|
| NAME: <input type="text"/>                                  | GENERATION: <input type="text"/>                     | DOB: <input type="text"/>   | SOCIAL SECURITY NUMBER: <input type="text"/> | HOME PHONE: <input type="text"/>  |
| LAST                      FIRST                      MIDDLE |  | / /                         | - -  | ( ) -   |
| ADDR: <input type="text"/>                                  | TIME AT ADDRESS: <input type="text"/>                |                             |  | <input type="text"/>  |
|   | If time at address is less than 1 yr., list Previous |                             |  | YR    MO  |
| CITY: <input type="text"/>                                  | STATE: <input type="text"/>                          | ZIP: <input type="text"/>   | MORT/RENT\$: <input type="text"/>            | <input type="radio"/> OWN <input type="radio"/> RENT<br><input type="radio"/> LIVE WITH RELATIVE<br><input type="radio"/> OTHER |
| PREV ADDR: <input type="text"/>                             | CITY: <input type="text"/>                           | STATE: <input type="text"/> | ZIP: <input type="text"/>                    | TIME AT PREV ADD: <input type="text"/>  |
|   |  |                             |  | YR    MO  |
| EMPLOYER: <input type="text"/>                              | OCCUPATION: <input type="text"/>                     |                             |  |   |
| EMPLOYER PHONE: <input type="text"/>                        | TIME ON JOB: <input type="text"/>                    | <input type="text"/>        | SALARY \$: <input type="text"/>              | <input type="radio"/> MONTHLY GROSS<br><input type="radio"/> ANNUAL GROSS   |
|   | If less than 1 year, list Previous                   | YR    MO                    |  |   |
| PREVIOUS EMPLOYER: <input type="text"/>                     | TIME ON PREV JOB: <input type="text"/>               |                             |  | <input type="text"/>  |
|   |  |                             |  | YR    MO  |

**\*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.**

|  |   |                                     |                                     |
|--|---|-------------------------------------|-------------------------------------|
| OTHER INCOME \$:* <input type="text"/> | SOURCE OF OTHER INCOME:* <input type="text"/> | <input type="radio"/> MONTHLY GROSS | EMAIL ADDRESS: <input type="text"/> |
|  |   | <input type="radio"/> ANNUAL GROSS  |                                     |

PLEASE LIST THE FOLLOWING INFORMATION FOR YOUR NEAREST RELATIVE OR PARENT WHO DOES NOT LIVE WITH YOU:

|                            |                               |                             |
|----------------------------|-------------------------------|-----------------------------|
| NAME: <input type="text"/> | ADDRESS: <input type="text"/> | PHONE: <input type="text"/> |
|                            |                               | ( ) -                       |

**SECTION B: CO-APPLICANT OR GUARANTOR INFORMATION:**

|   |  |                             |  |   |
|---|--|-----------------------------|--|---|
| NAME: <input type="text"/>                                  | GENERATION: <input type="text"/>                     | DOB: <input type="text"/>   | SOCIAL SECURITY NUMBER: <input type="text"/> | HOME PHONE: <input type="text"/>  |
| LAST                      FIRST                      MIDDLE |  | / /                         | - -  | ( ) -   |
| ADDR: <input type="text"/>                                  | TIME AT ADDRESS: <input type="text"/>                |                             |  | <input type="text"/>  |
|   | If time at address is less than 1 yr., list Previous |                             |  | YR    MO  |
| CITY: <input type="text"/>                                  | STATE: <input type="text"/>                          | ZIP: <input type="text"/>   | MORT/RENT\$: <input type="text"/>            | <input type="radio"/> OWN <input type="radio"/> RENT<br><input type="radio"/> LIVE WITH RELATIVE<br><input type="radio"/> OTHER |
| PREV ADDR: <input type="text"/>                             | CITY: <input type="text"/>                           | STATE: <input type="text"/> | ZIP: <input type="text"/>                    | TIME AT PREV ADD: <input type="text"/>  |
|   |  |                             |  | YR    MO  |
| EMPLOYER: <input type="text"/>                              | OCCUPATION: <input type="text"/>                     |                             |  |   |
| EMPLOYER PHONE: <input type="text"/>                        | TIME ON JOB: <input type="text"/>                    | <input type="text"/>        | SALARY \$: <input type="text"/>              | <input type="radio"/> MONTHLY GROSS<br><input type="radio"/> ANNUAL GROSS   |
|   | If less than 1 year, list Previous                   | YR    MO                    |  |   |
| PREVIOUS EMPLOYER: <input type="text"/>                     | TIME ON PREV JOB: <input type="text"/>               |                             |  | <input type="text"/>  |
|   |  |                             |  | YR    MO  |

**\*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.**

|  |   |                                     |                                     |
|--|---|-------------------------------------|-------------------------------------|
| OTHER INCOME \$:* <input type="text"/> | SOURCE OF OTHER INCOME:* <input type="text"/> | <input type="radio"/> MONTHLY GROSS | EMAIL ADDRESS: <input type="text"/> |
|  |   | <input type="radio"/> ANNUAL GROSS  |                                     |

PLEASE LIST THE FOLLOWING INFORMATION FOR YOUR NEAREST RELATIVE OR PARENT WHO DOES NOT LIVE WITH YOU:

|                            |                               |                             |
|----------------------------|-------------------------------|-----------------------------|
| NAME: <input type="text"/> | ADDRESS: <input type="text"/> | PHONE: <input type="text"/> |
|                            |                               | ( ) -                       |

**SECTION C: LEGAL NOTICES/SIGNATURES:**

See Other Side - Section D for IMPORTANT NOTICES. I certify that I have read this application including the notices on the back side. I certify that the information in this application is complete and accurate. I authorize Mitsubishi Motors Credit of America, Inc. ("MMCA") to investigate my credit and employment history and to release information about my credit experience with MMCA. I request that MMCA forward this application, if needed, in considering my application to Customized Auto Credit Services, Inc. and to creditors associated with MMCA by contract.

Applicant Signature: \_\_\_\_\_ Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DEALER USE ONLY:**

|                                       |                                     |   |   |                                       |   |
|---------------------------------------|-------------------------------------|---|---|---------------------------------------|---|
| Special Program: <input type="text"/> | Vehicle Yr: <input type="text"/>    | <input type="radio"/> NEW<br><input type="radio"/> USED | Make: <input type="text"/>                  | Model: <input type="text"/>           | Market Plan: <input type="text"/>       |
| Term: <input type="text"/>            | MSRP/Whls Val: <input type="text"/> | Loan Amt/Cap Cost: <input type="text"/>                 | Down Pmt/Trade Equity: <input type="text"/> | Trade-in Pmt \$: <input type="text"/> | Requested Payment: <input type="text"/> |

**SECTION D: LEGAL NOTICES/SIGNATURES:**

**Notice to New York Applicants:** In connection with your application for credit, employment or insurance, a consumer report may be requested. On your request, we will advise if the report was actually ordered and if so, the name and address of the agency that furnished the report. Subsequent consumer reports may be ordered.

**Notice to Ohio Applicants:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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.

**Notice to California Applicants:** A married applicant may apply for an individual account.

**Notice to New Hampshire Applicants (Diamond Advantage Plan customers only):** You are entitled, upon request, to receive a written estimate of the monthly payment amount for a balloon payment refinancing in accordance with the creditor's then existing refinance programs prior to entering into a balloon (Diamond Advantage Plan) contract.

**Notice to Vermont Applicants Pursuant To 9 V.S.A. Sec. 2480e:** By signing below, you give your consent to the dealer to whom this application is submitted and/or to Mitsubishi Motors Credit of America, Inc. (MMCA) to obtain a credit report on you for the purpose of evaluating your credit application. In the event your application is approved, you also give your consent to MMCA to obtain credit reports for the purpose of reviewing your account, increasing the credit line, or taking collection action on the account, or for other legitimate purposes associated with the account.

Applicant Signature: \_\_\_\_\_ Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FAIR CREDIT REPORTING ACT DISCLOSURE:** This application for credit will be submitted to MITSUBISHI MOTORS CREDIT OF AMERICA, Inc. at 6363 Katella Avenue, Cypress, CA 90630-5205 and may be submitted to CUSTOMIZED AUTO CREDIT SERVICES, INC. at 540 W. NW Highway, Barrington, IL 60010 for purchase or consideration as to whether it meets purchase requirements.

**Notice to Wisconsin Applicants:** No provision of a marital property agreement, a unilateral statement under Section 766.59 Wisconsin Statutes, or a court decree under Section 766.70 Wisconsin Statutes adversely affects the interest of a creditor unless the creditor, prior to the time 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.

**Notice to Married Wisconsin Residents:** The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand the creditor may be required by law to give notice of this credit transaction to my spouse.

Spouse's Name: \_\_\_\_\_ Spouse's Address: \_\_\_\_\_