

**CREDIT APPLICATION IMPORTANT: READ THESE DIRECTIONS BEFORE COMPLETING THIS APPLICATION. (Purchase / Lease)**

- CHECK APPROPRIATE BOX if you are applying for individual credit in your own name (based solely on your own income or assets) and NOT on the income or assets of another person as the basis for repayment of the credit requested, complete Sections A and C.  
 if you are married and live in a community property state, complete all Sections including Section B providing information about your spouse.  
 If this is an application for joint credit with another person, complete all Sections providing information in Section B about the co-applicant.

**NOTE: IF MARRIED, APPLICANT MAY APPLY FOR A SEPARATE ACCOUNT.**

SEC. 1777 STOCK NUMBER VIN DATE AMOUNT REQUESTED \$

**SECTION A INFORMATION REGARDING APPLICANT (Use additional sheets if necessary)**

|   |                         |         |               |                      |                            |                  |                |
|---|-------------------------|---------|---------------|----------------------|----------------------------|------------------|----------------|
| LAST NAME   | FIRST                   | INITIAL | BIRTHDATE     | DRIVER'S LICENCE NO. | SOC. SEC. NO. / FED ID NO. | DEPENDENT'S AGES | MARITAL STATUS |
| ADDRESS   | PHONE NUMBER            |         | HOW LONG? YRS | MOS.                 | HOW LONG? YRS              | MOS.             |                |
| PRIOR RESIDENTIAL ADDRESSES (FOR PREVIOUS 5 YEARS)    | LIVED IN COMMUNITY? YRS |         | MOS.          | HOW LONG? YRS        | MOS.                       |                  |                |
| PRESENT EMPLOYER                                      | LIVED IN COMMUNITY? YRS |         | MOS.          | HOW LONG? YRS        | MOS.                       |                  |                |
| EMPLOYER ADDRESS                                      | OCCUPATION OR TITLE     |         |               |                      |                            |                  |                |
| PRIOR EMPLOYMENT ADDRESSES (FOR PREVIOUS 5 YEARS)     | PHONE NUMBER            |         | HOW LONG? YRS | MOS.                 | HOW LONG? YRS              | MOS.             |                |
| ADDRESS OF NEAREST RELATIVE NOT LIVING WITH APPLICANT | PHONE NUMBER            |         | HOW LONG? YRS | MOS.                 | HOW LONG? YRS              | MOS.             | RELATIONSHIP   |

**INCOME:** Applicant's gross monthly income from employment..... \$ \_\_\_\_\_  
 Alimony, child support, or separate maintenance income need not be revealed if you to not wish to have it considered as a basis for repaying this obligation. \$ \_\_\_\_\_  
 Alimony, child support, separate maintenance received under:  Court Order  Written Agreement  Oral Agreement \$ \_\_\_\_\_  
 Amount of other monthly income Source(s): \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL MONTHLY INCOME:** \$ \_\_\_\_\_

**SECTION B INFORMATION REGARDING SPOUSE OR CO-APPLICANT (Use additional sheets if necessary)**

|   |                         |         |               |                      |                            |                  |                |
|---|-------------------------|---------|---------------|----------------------|----------------------------|------------------|----------------|
| LAST NAME   | FIRST                   | INITIAL | BIRTHDATE     | DRIVER'S LICENCE NO. | SOC. SEC. NO. / FED ID NO. | DEPENDENT'S AGES | MARITAL STATUS |
| ADDRESS   | PHONE NUMBER            |         | HOW LONG? YRS | MOS.                 | HOW LONG? YRS              | MOS.             |                |
| PRIOR RESIDENTIAL ADDRESSES (FOR PREVIOUS 5 YEARS)    | LIVED IN COMMUNITY? YRS |         | MOS.          | HOW LONG? YRS        | MOS.                       |                  |                |
| PRESENT EMPLOYER                                      | LIVED IN COMMUNITY? YRS |         | MOS.          | HOW LONG? YRS        | MOS.                       |                  |                |
| EMPLOYER ADDRESS                                      | OCCUPATION OR TITLE     |         |               |                      |                            |                  |                |
| PRIOR EMPLOYMENT ADDRESSES (FOR PREVIOUS 5 YEARS)     | PHONE NUMBER            |         | HOW LONG? YRS | MOS.                 | HOW LONG? YRS              | MOS.             |                |
| ADDRESS OF NEAREST RELATIVE NOT LIVING WITH APPLICANT | PHONE NUMBER            |         | HOW LONG? YRS | MOS.                 | HOW LONG? YRS              | MOS.             | RELATIONSHIP   |

**INCOME:** Applicant's gross monthly income from employment..... \$ \_\_\_\_\_  
 Alimony, child support, or separate maintenance income need not be revealed if you to not wish to have it considered as a basis for repaying this obligation. \$ \_\_\_\_\_  
 Alimony, child support, separate maintenance received under:  Court Order  Written Agreement  Oral Agreement \$ \_\_\_\_\_  
 Amount of other monthly income Source(s): \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL MONTHLY INCOME:** \$ \_\_\_\_\_

**SECTION C ASSET AND DEBT INFORMATION** List all debt. (Use additional sheets if necessary.) If applicant has completed Section B, this Section should be completed providing information concerning both the Applicant and Co-Applicant. Please mark Applicant-related information with an "A". If Section B was NOT completed, only provide information concerning the Applicant in this Section.

|   |  |                                       |   |                     |   |                   |                             |
|---|--|---------------------------------------|---|---------------------|---|-------------------|-----------------------------|
| <input type="checkbox"/> OWN<br><input type="checkbox"/> RENT                     |  | LANDLORD OR MORTGAGE HOLDER / ADDRESS |   | MORTGAGE BALANCE \$ |   | PAYMENT / RENT \$ |                             |
| ACCOUNT NUMBER  | DATE HOME PURCHASED                            | AGE OF HOME                           | PRICE PAID FOR HOME \$  | MARKET VALUE \$     | 2ND MORTGAGE AMOUNT \$  |                   | PAYMENT \$                  |
| CREDIT TYPE   | COMPANY NAME                                   | ACCOUNT NO.                           | <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED | ADDRESS             | BALANCE   | HIGH              | MONTHLY PYMT. OR DATE CLOSE |
|   |  |                                       |   |                     | \$  | \$                | \$                          |
|   |  |                                       | <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED |                     | \$  | \$                | \$                          |
|   |  |                                       | <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED |                     | \$  | \$                | \$                          |
| PRESENT VEHICLE FINANCED BY / LEASED BY   |  | ACCOUNT NO.                           |   | ADDRESS             | \$  |                   |                             |
| PRESENT VEHICLE FINANCED BY / LEASED BY   |  | ACCOUNT NO.                           |   | ADDRESS             | \$  |                   |                             |
| BANK REFERENCE <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS |  | ACCOUNT NO.                           |   | BRANCH ADDRESS      | BALANCE \$  |                   |                             |
| BANK REFERENCE <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS |  | ACCOUNT NO.                           |   | BRANCH ADDRESS      | BALANCE \$  |                   |                             |
| HAVE YOU EVER HAD ANY PROPERTY REPOSSESSED?                                       | DO YOU HAVE ANY LAW SUITS PENDING AGAINST YOU? |                                       |   |                     | ARE YOU IN THE MILITARY RESERVE?<br><input type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE |                   |                             |
| PERSONAL FRIENDS KNOWN OVER 1 YEAR  | ADDRESS  |                                       |   |                     | PHONE NUMBER  |                   |                             |
| PERSONAL FRIENDS KNOWN OVER 1 YEAR  | ADDRESS  |                                       |   |                     | PHONE NUMBER  |                   |                             |

**INSURANCE INFORMATION:** Note: No person is required as a condition precedent to financing the purchase of a motor vehicle to purchase insurance through a particular insurance company, agent, or broker.

|  |                                |   |
|--|--------------------------------|---|
| PREVIOUS INSURANCE COMPANY OR AGENT                    | WHERE WILL VEHICLE BE GARAGED? | POLICY NUMBER                                   |
| HAS YOUR INSURANCE EVER BEEN CANCELLED BY ANY COMPANY? | IF YES, WHY?                   | TOTAL AMOUNT OF LOSSES \$                       |
|  |                                | NUMBER OF INSURANCE LOSSES IN THE PAST 5 YEARS? |

In the following sentence, the applicant/co-applicant is referred to as "you and your". I, the undersigned (1) make the above representations, which are certified correct, for the purpose of securing credit; (2) authorize financial institutions to obtain consumer credit reports on me periodically and to gather employment history as they consider necessary and appropriate; (3) authorize your affiliates to obtain consumer credit reports on me; (4) UNLESS THE CIRCLE THAT FOLLOWS IS MARKED, I AUTHORIZE THE DEALER'S ASSIGNEE TO SHARE AND USE INFORMATION ABOUT ME, INCLUDING INFORMATION IN MY APPLICATION, WITH OTHER ENTITIES THAT ARE RELATED TO IT BY COMMON OWNERSHIP OR AFFILIATION WITH IT BY COMMON CONTROL. IF THE CIRCLE IS MARKED, I DIRECT THE DEALER'S ASSIGNEE NOT TO GIVE INFORMATION TO SUCH ENTITIES (OTHER THAN INFORMATION ON ITS OWN TRANSACTIONS AND EXPERIENCES.) O; (5) Understand, that you or any financial institution to whom it is submitted will retain this application whether or not it is approved and that it is the applicant's responsibility to notify the creditor of any changes of name, address, or employment.

**The financial institutions named below may be requested to purchase a sales finance contract written, or to be written, in connection with your purchase. You are notified pursuant to the Fair Credit Reporting Act, that your application may be submitted to them or to other financial institutions.**

CALIFORNIA THRIFT - CHASE - DCFB TRUST - FIRESIDE - FORD MOTOR CREDIT - GMAC - UNION BANK - WESTERN FINANCIAL - WELLS FARGO - DAIMLERCHRYSLER LLC - BANK ONE - TFS - TMI RANCHO SANTA FE - WESTCORP - FRANKLIN - NIFCU - MERC - FIDELITY - A + L - BANK OF THE WEST - VNIIS - CU ACCEPTANCE - LBAC - 1ST MERCHANTS - ONYX - ACG AMERICREDIT - ARCADIA FINANCIAL - UAS - BMW FS - PREMIER - WFS - HOUSEHOLD - SANTEL - PT. LOMA - CPS - UNION - BALBOA - WORLD OMNI - SAAB FINANCIAL SERVICE CORP. - VENA - AFG - LFS - ON AMERICAN HONDA FINANCE - NISSAN MOTOR ACCEPTANCE CORPORATION - MMCA - LBS - USAFCU - DFS - AFECU - CALIFORNIA BANK & TRUST - BANK OF AMERICA - MERCEDES-BENZ CREDIT PURCHASER HEREBY ACKNOWLEDGES RECEIPT OF A COPY OF THIS CREDIT STATEMENT

**X** APPLICANT'S SIGNATURE  
 CO-APPLICANT'S SIGNATURE  
 ADVENT RESOURCES, INC. (COPYRIGHT 1997) No warranty is expressed or implied, as to the content of fitness for the purpose of this form. Consult your own legal counsel. (REV. 10/97) CaE01

**Authorization to Negotiate Terms of Automobile Purchase/Lease**

I, \_\_\_\_\_ authorize Ted Fenton to negotiate my automobile purchase and/or lease. I have given a credit application, a copy of my driver's license, and a copy of my current auto insurance to Ted Fenton. I give Ted Fenton full permission to present my credit application. I further authorize Ted Fenton to view my credit history report.

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**WITNESS:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

A handwritten signature in cursive script, appearing to read "Ted Fenton", is written over the signature line of the witness section.