AMERICAN GENERAL FINANCE

10136

PLEASE PRINT PLAINLY

Credit Applied For: ☐ Joint ☐ Individual

Date: ___ / ___ / ___

(A married applicant may apply for an individual account.)

Last Name | First Name | MI | Suffix

Date of Birth | Social Security Number | # Dependents

Time At Address Yrs. Mos. | Present Address (Street Address or P.O. Box Number)

City | State | Zip | Home Phone

☐ Buying ☐ Renting ☐ Own | Mo. Rent/Mtg. Pmt. | Mortgage Balance | Value Of Home

PRESENT EMPLOYER (Name of Company) | Employer's Phone

City | State | Occupation or Title | Time At Employer Yrs. Mos.

Income ☐ Gross ☐ Net ☐ Monthly ☐ Annual | Type of Bank Account ☐ Checking ☐ Savings

NOTE: 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 ☐ Gross ☐ Net ☐ Monthly ☐ Annual | Source Of Other Income

Drivers License # | Personal Reference (Not living with you) | Reference Phone ( ) -

Email Address

Last Name of Co-Applicant | First Name | MI | Suffix

Date of Birth | Social Security Number | Relationship to Applicant: ☐ Spouse ☐ Non-spouse

If present address is the same as above, check here: ☐

Time At Address Yrs. Mos. | Present Address (Street Address or P.O. Box Number)

City | State | Zip | Home Phone

PRESENT EMPLOYER (Name of Company) | Employer's Phone

City | State | Occupation or Title | Time At Employer Yrs. Mos.

NOTE: 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 ☐ Gross ☐ Net ☐ Monthly ☐ Annual | Type of Bank Account ☐ Checking ☐ Savings

Other Income ☐ Gross ☐ Net ☐ Monthly ☐ Annual | Source Of Other Income

Total Purchase	Down Payment	Amount Financed
.	.	.

APPLICANT/JOINT APPLICANT : Please read and sign below.

Seller will submit your application to American General Finance, Inc. (AGF), P.O. Box 59, Evansville, IN 47701, or its affiliate, which may buy your Retail Installment Sales Contract.

AGF may share with its affiliates any information regarding you or your application, acceptance, or credit experience with AGF. However, you may request that this information not be shared with affiliates by notifying AGF by mail or phone at the location shown above or by initialing this box: ___ Please DO NOT share information about me with your affiliates.

AGF may investigate your creditworthiness (including obtaining credit reports and verifying employment information). AGF may request a consumer report from consumer reporting agencies in considering your credit application. AGF may use any credit report obtained in connection with this application for future credit offers.

FROM TIME TO TIME, AGF WILL NOTIFY YOU WHEN ADDITIONAL FINANCIAL SERVICES ARE AVAILABLE, BY TELEPHONE AND/OR MAIL, AND THAT SUCH SERVICES MAY INCLUDE NEGOTIABLE CHECKS WHICH YOU MAY ENDORSE TO OBTAIN A LOAN, OR DESTROY IF YOU DO NOT WISH TO ACCEPT THE LOAN OFFER. IF YOU DO NOT WISH TO RECEIVE THESE SOLICITATIONS, PLEASE STRIKE AND INITIAL THIS PARAGRAPH.

NEW YORK, OHIO, AND WISCONSIN RESIDENTS: SEE REVERSE SIDE FOR IMPORTANT INFORMATION.

Applicant's Signature | Date | Co- Applicant's Signature | Date

Seller's Name | Seller's Merchandise

MERCHANT USE ONLY Seller's Fax ( ) -