

Mark's Leisure Time Marine
5364 E Lake Rd
Conesus, NY 14435

Credit Application

APPLICANT INFORMATION				
Last name:	First name:	Phone:	Cell Phone:	
Address:	City:	State:	ZIP:	Fax:
How Long at Current Residence:	Phone:	E-mail address:		
<input type="checkbox"/> Rent Monthly Payment _____	Date of Birth:	Social Security Number:		
<input type="checkbox"/> Own Monthly Payment _____				
Current Employer:		How Long with Current Employer:		
Address:	Phone:			Position:
Co-Applicant's Name:		Co-Applicant's Social Security Number:		

PLEASE PROVIDE TWO CREDIT REFERENCES; CREDIT REFERENCE 1			
Account name:	Contact person:	Phone:	Fax:
Billing address:	City:	State:	ZIP:
Account number:	Number of years:		

CREDIT REFERENCE 2			
Account name:	Contact person:	Phone:	Fax:
Billing address:	City:	State:	ZIP:
Account number:	Number of years:		

FINANCIAL INFORMATION			
Financial institution:	Contact person:	Contact number:	
Address:	City:	State:	ZIP:
Account number: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Number of years:	Account number: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Number of years:		
I authorize my financial institution to release information to Mark's Leisure Time Marine.		Authorized Signature and Date:	

FOR COMPANY USE ONLY		
Application date:	Verified by:	Date approved:
Customer number assigned:	Lender:	

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The preceding information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Mark's Leisure Time Marine to investigate all references and customary credit information sources including consumer credit reporting repositories regarding my/our credit and financial responsibility for the purpose of obtaining credit for the purchase of goods and obtaining financing from a nationally accepted lender.

APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY, AND WILLINGNESS TO PAY IN ACCORDANCE WITH LENDER TERMS:

Name: _____

Signature: _____ **Date** _____

Name: _____

Signature: _____ **Date** _____