

Deferred Payment  Yes  No \_\_\_\_\_ Days

# HOME IMPROVEMENT APPLICATION

Dealer Name \_\_\_\_\_

CASH PRICE	DOWN PAYMENT	LOAN AMOUNT	TYPE OF LOAN:  ____ SECURED  ____ UNSECURED	TYPE OF WORK: ____ KITCHEN & BATH ____ POOL ____ SPA ____ OTHER	Dealer # _____ Application # _____
TERM (MONTHS)	LIEN POSITION		____ ROOM ADDITION, GARAGE, MFG. ROOM ADDITION ____ WINDOWS, SIDING, ROOFING		

## Applicant

## Co-Applicant

Social Security No.	Application Type: Individual <input type="checkbox"/> Joint <input type="checkbox"/>	Social Security No.
First Name Middle Last Name	No. of Dependents	First Name Middle Last Name No. of Dependents
Address (Number & Street) City State Zip		Address (Number & Street) City State Zip
County Home Phone Date of Birth		County Home Phone Date of Birth
Address of property to be improved if different from above.		Address of property to be improved if different from above.
Specify for Joint or Secured Credit Only: Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed) <input type="checkbox"/>		Specify for Joint or Secured Credit Only: Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed) <input type="checkbox"/>
Buying <input type="checkbox"/> Own <input type="checkbox"/> Other (Please Specify) <input type="checkbox"/>	Monthly Mortgage \$	Buying <input type="checkbox"/> Own <input type="checkbox"/> Other (Please Specify) <input type="checkbox"/>
Mortgage Co. <input type="checkbox"/>	Name: Address:	Mortgage Co. <input type="checkbox"/>
Date Purchased Purchase Price \$ Account No.		Date Purchased Purchase Price \$ Account No.
Mortgage Balance Market Value Time at Residence: Yrs. Mos.		Mortgage Balance Market Value Time at Residence: Yrs. Mos.
Previous Residence: (Street/City/State) Time at Residence: Yrs. Mos.		Previous Residence: (Street/City/State) Time at Residence: Yrs. Mos.
Mortgage Co. <input type="checkbox"/> Landlord <input type="checkbox"/>	Name: Address:	Mortgage Co. <input type="checkbox"/> Landlord <input type="checkbox"/>
Present Employer Name: Address: City State Phone No.		Present Employer Name: Address: City State Phone No.
Occupation Length of Employment Yrs. Mos.		Occupation Length of Employment Yrs. Mos.
Gross Mo. Salary Net Mo. Salary \$		Gross Mo. Salary Net Mo. Salary \$
Previous Employer City/State Phone No.		Previous Employer City/State Phone No.
Occupation Length of Employment Yrs. Mos.		Occupation Length of Employment Yrs. Mos.
Nearest Relative Address/Phone#		Nearest Relative Address/Phone#
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.		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: Source Monthly Amount \$		Other Income: Source Monthly Amount \$
Has Applicant declared bankruptcy in the last 10 years? Yes <input type="checkbox"/> No <input type="checkbox"/>		Has Co-Applicant declared bankruptcy in the last 10 years? Yes <input type="checkbox"/> No <input type="checkbox"/>

Complete only if co-applicant is not spouse. If different than applicant.

### The following information pertains to both Applicant and Co-Applicant

2nd Mortgage Y  N  Balance \_\_\_\_\_ Payment \_\_\_\_\_ Savings  Bank Name \_\_\_\_\_ Acct. # \_\_\_\_\_  
 Mortgage Company \_\_\_\_\_ Checking  Bank Name \_\_\_\_\_ Acct. # \_\_\_\_\_

LIST BELOW ALL DEBTS NOW OWING (include other large monthly payments for medical expense, insurance, alimony or support). Under the column "Debtor" identify Applicant's debts with the letter (A) and Co-Applicant's debt with the letter (C).

Applicant Debts	Payment	Balance	Co-Applicant Debts	Payment	Balance

NOTICE - APPRAISAL COPY: You have the right to a copy of the appraisal report used in connection with your application for credit. If you wish a copy, please write to us at the mailing address we have provided. We must hear from you no later than 90 days after we notify you about the action taken on your credit application or you withdraw your application. The following information is requested by the federal government for certain types of loans relating to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that any lender may not discriminate on the basis of this information or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations, the lender is required to note race or national origin and sex on the basis of visual observation or surname. Lender please designate by parenthesis (x) if applicant declines. If you do not wish to furnish this information, please check below.


<b>Applicant</b>	<b>Co-Applicant</b>
I Decline to Furnish This Information (Initial) _____	I Decline to Furnish This Information (Initial) _____
SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female	SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female
<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> American Indian or Alaskan Native
<input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> Other _____	<input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> Other _____

**ME, NY, RI, and VT Accounts:** A consumer report (credit report) may be requested in connection with this credit application. Upon request, I will be informed whether or not a consumer report was requested, and if a consumer report was requested, I will also be informed of the name and address of the consumer reporting agency that furnished the consumer report. If my credit application is granted, subsequent consumer reports may be obtained in connection with any update, extension, or renewal of credit, or collection of the account.

**OH Accounts:** 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.

**WI Accounts:** Notice to Married Wisconsin Debtors: Unless indicated otherwise, I acknowledge this debt is for a family purpose. No marital property agreement, unilateral statement (WI Stat. Sec. 766.59), or court decree (WI Stat. Sec. 766.70) adversely affects your interest unless you know about it before credit is extended.

The following party will be requested to extend credit in connection with this transaction



**Key Bank USA, NA**  
 8757 Red Oak Blvd.  
 Suite 250  
 Charlotte, NC 28217  
 1-800-784-6494

I/We authorize you to share my/our application, along with supporting documentation and credit report, with one or more of your affiliates.  No, I/we do not want my/our application shared. Initials \_\_\_\_\_

By signing this application you promise that all information is true and complete. You also promise that you have revealed any pending lawsuits or unpaid judgements against you. You intend the seller and/or assignee to rely upon these promises in deciding whether to extend credit to you. You authorize a full investigation of your credit record and your employment history. You also authorize the seller and/or assignee to release information about your credit experience with them.  
**Read special notices before signing.**

Signature (Applicant) \_\_\_\_\_ Date \_\_\_\_\_  
 Signature (Co-Applicant) \_\_\_\_\_ Date \_\_\_\_\_