

P:718.280.1777

PRIMETIME MOTOR GROUP

F:718.374.5354

APPLICANT

First Name: _____ Last Name: _____ Middle Initial: _____
 Social Security #: _____ - _____ - _____ Date of Birth: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____ How Long?: ____ Years ____ Months
 Home Phone: _____ Mobile Phone: _____
 Email: _____
 Residence (Circle One Below) or Other: _____ Monthly Payment: _____
 Rent Own Outright Mortgage
 Previous Address (If less than 2 years at current): _____

EMPLOYMENT

Employer Name: _____ Position: _____
 Business Address: _____
 Employer's Phone #: _____ How Long?: ____ Years ____ Months
 Gross Annual Income: _____ Other Income: _____

CO-APPLICANT (IF APPLICABLE)

First Name: _____ Last Name: _____ Middle Initial: _____
 Social Security #: _____ - _____ - _____ Date of Birth: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____ How Long?: ____ Years ____ Months
 Home Phone: _____ Mobile Phone: _____
 Email: _____
 Residence (Circle One Below) or Other: _____ Monthly Payment: _____
 Rent Own Outright Mortgage
 Previous Address (If less than 2 years at current): _____

CO-APPLICANT EMPLOYMENT

Employer Name: _____ Position: _____
 Business Address: _____
 Employer's Phone #: _____ How Long?: ____ Years ____ Months
 Gross Annual Income: _____ Other Income: _____

Applicant Signature: _____ **Co-Applicant Signature:** _____