

swapalease

Please fill in ALL of the blanks!

**This credit application is for New Loan, New Lease and Refinance Programs only.
To assume a lease you will need the credit application for the specific leasing company.
Contact swapalease.com 1-877-781-2070 to find out how to get
a specific leasing company's credit application.**

When complete, FAX this application to 513-381-1091

CREDIT APPLICATION (DEALER USE ONLY)		This application is for Swapalease vehicle ID #		Your Email Address			
A P P L I C A N T	First Name	Initial	Last Name	Birth Date	Social Security Number	Telephone	
	Current Address	City	State	Zip Code	Years	Home: Rent _____ Own _____ <small>(Check One)</small>	
	Previous Address	City	State	Zip Code	Years	Amount of Payment \$ _____	
	Current Employer (if retired, from what Company?)			Position	Years	Phone	Gross Income/Monthly
	Previous Employer (if less than 3 years at current employer)			Position	Years	Phone	Gross Income/Monthly
				Have you been declared bankrupt in the last 14 years? No ___ Yes ___ Date: _____	Other Income \$ _____ Source: _____ <small>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.</small>		
Relationship to Applicant:							
C O : A P P L I C A N T	First Name	Initial	Last Name	Birth Date	Social Security Number	Telephone	
	Current Address	City	State	Zip Code	Years	Home: Rent _____ Own _____ <small>(Check One)</small>	
	Previous Address	City	State	Zip Code	Years	Amount of Payment \$ _____	
	Current Employer (if retired, from what Company?)			Position	Years	Phone	Gross Income/Monthly
	Previous Employer (if less than 3 years at current employer)			Position	Years	Phone	Gross Income/Monthly
				Have you been declared bankrupt in the last 14 years? No ___ Yes ___ Date: _____	Other Income \$ _____ Source: _____ <small>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.</small>		

Complete only if Co-Applicant desires to be jointly liable for debt

I represent that all information contained in this application for credit is true, complete, and correct. I authorize you, in determining my eligibility for credit, renewal of credit, and future credit extensions, to verify my employment, income, and all other information I have provided, and obtain information about me from credit bureaus, other creditors, employers, federal and state records (including state motor vehicle departments), and other third parties. I also authorize you to furnish to other persons, upon request, information concerning my credit and financial transactions or experiences with the bank.

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Applicant _____ Date _____ Co-Applicant _____ Date _____