



CREDIT APPLICATION

Dealer Name

MMCA Dealer #

App#

☐ Retail ☐ LeaseCHECK
ONE

- ☐ **INDIVIDUAL CREDIT** - If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete Sections A, C, D, and E.
>> If you are married and live in a community property state (AZ, CA, ID, LA, NV, NM, TX, WA, WI), provide information about your spouse in Section B. Your spouse should not sign as "Co-Applicant."
- ☐ **JOINT CREDIT** - If you are applying for joint credit with another person ("Co-Applicant"), complete all Sections.

SECTION A: APPLICANT INFORMATION

Last Name, First Name, Middle Name		<input type="checkbox"/> Junior <input type="checkbox"/> Senior	Social Security Number		DOB (MM/DD/YYYY)	
Email Address	Home Phone ()	Cell Phone ()		Driver's License Number		Driver's License State
Current Address			City/State/Zip			
<input type="checkbox"/> Rent / Lease <input type="checkbox"/> Own <input type="checkbox"/> Live With Relatives <input type="checkbox"/> Other			Mortgage / Rent (Monthly) \$		Time At Current Address	Years Months
Previous Address (if less than 1 year at Current Address)			City/State/Zip		Time At Previous Address	Years Months
Nearest Relative Not Living With You	Nearest Relative's Address		Phone ()		Relationship	
Name of Personal Reference	Personal Reference's Address		Phone ()		Relationship	
Bank Name	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	Account Number	Education Completed	<input type="checkbox"/> High School <input type="checkbox"/> Bachelors	<input type="checkbox"/> Masters <input type="checkbox"/> Doctorate	
Employer	Occupation / Rank	Employer Phone ()		Time At Current Employer	Years Months	
Employer Address		City/State/Zip				
Previous Employer (if less than 1 year at current Employer)	Occupation / Rank	Employer Phone ()		Time At Previous Employer	Years Months	
Previous Employer Address		City/State/Zip				
APPLICANT INCOME 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.		Gross Monthly Income From Employment			\$	
		Alimony, child support, or separate maintenance received under <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Verbal Agreement			\$	
		Other Monthly Income - Source _____			\$	
		TOTAL MONTHLY INCOME			\$	

SECTION B: INFORMATION REGARDING ☐ CO-APPLICANT ☐ SPOUSE (COMMUNITY PROPERTY STATES) ☐ COSIGNER

Last Name, First Name, Middle Name		<input type="checkbox"/> Junior <input type="checkbox"/> Senior	Social Security Number		DOB (MM/DD/YYYY)	
Email Address	Home Phone ()	Cell Phone ()		Driver's License Number		Driver's License State
Current Address			City/State/Zip			
<input type="checkbox"/> Rent / Lease <input type="checkbox"/> Own <input type="checkbox"/> Live With Relatives <input type="checkbox"/> Other			Mortgage / Rent (Monthly) \$		Time At Current Address	Years Months
Previous Address (if less than 1 year at Current Address)			City/State/Zip		Time At Previous Address	Years Months
Nearest Relative Not Living With You	Nearest Relative's Address		Phone ()		Relationship	
Name of Personal Reference	Personal Reference's Address		Phone ()		Relationship	
Bank Name	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	Account Number	Education Completed	<input type="checkbox"/> High School <input type="checkbox"/> Bachelors	<input type="checkbox"/> Masters <input type="checkbox"/> Doctorate	
Employer	Occupation / Rank	Employer Phone ()		Time At Current Employer	Years Months	
Employer Address		City/State/Zip				
Previous Employer (if less than 1 year at current Employer)	Occupation / Rank	Employer Phone ()		Time At Previous Employer	Years Months	
Previous Employer Address		City/State/Zip				
CO-APPLICANT INCOME 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.		Gross Monthly Income From Employment			\$	
		Alimony, child support, or separate maintenance received under <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Verbal Agreement			\$	
		Other Monthly Income - Source _____			\$	
		TOTAL MONTHLY INCOME			\$	



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SECTION C: MARITAL STATUS

COMPLETE THIS SECTION ONLY IF (1) YOU LIVE IN A COMMUNITY PROPERTY STATE.

Applicant Check One	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced, and widowed)	Co-Applicant Check One	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced, and widowed)
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SECTION D: PREVIOUS CUSTOMER

Applicant	<input type="checkbox"/> Prior Mitsubishi Owner – When: _____ <input type="checkbox"/> Prior Mitsubishi Motors Credit – When: _____	Co-Applicant	<input type="checkbox"/> Prior Mitsubishi Owner – When: _____ <input type="checkbox"/> Prior Mitsubishi Motors Credit – When: _____
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SECTION E: LEGAL NOTICES / SIGNATURES

California Residents: If married, you may apply for a separate account.

Maine Residents: If your application is approved and credit is granted, you will be required to insure the vehicle against loss or damage. If this application is for a lease, you will also be required to have liability insurance. You may place this insurance through the agent or broker of your choice, whether or not such agent or broker is affiliated with the dealer or holder of your contract. Obtaining insurance from a particular agent or broker will not affect the credit decision unless the insurance product selected violates the terms of your contract.

New York Residents: A consumer report may be requested in connection with your application for credit. Upon your request, we will advise whether or not we actually ordered a report, and if we did, we will provide you the name and address of the consumer reporting agency that furnished the report. If credit is granted to you, subsequent consumer reports may be ordered.

Ohio Residents: 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.

Rhode Island Residents: A consumer report may be requested in connection with your application for credit.

Vermont Residents: By signing below you consent to the dealer, Mitsubishi Motors Credit of America, Inc., and any financial institution with which this credit application is shared, to obtain one or more credit reports about you for the purpose of evaluating your credit application. If your application is approved and credit is granted, you also consent to the parties granting credit and/or holding your account to obtain additional credit reports for the purpose of reviewing the account, taking collection action on the account, or for other legitimate purposes associated with the account.

Wisconsin Residents: No provision of a marital property agreement, a unilateral statement under Section 766.59 Wisconsin Statutes or a court decree under Section 766.70 Wisconsin Statutes adversely affects the interest of a creditor unless the creditor, prior to the time credit is granted, is furnished a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision when the obligation to the creditor is incurred.

Married Wisconsin Residents: This credit, if granted, is being incurred in the interest of your marriage or family. If your spouse is not applying jointly with you, please provide the full name and current address of your spouse:

Applicant's Spouse's Name _____ Address _____

Co-Applicant's Spouse's Name _____ Address _____

I certify that I have read this application including all disclosures. I certify that the information in this application is complete and accurate. I understand and agree that dealer may submit this application to Mitsubishi Motors Credit of America, Inc. and/or to other creditors so that they may decide whether or not to purchase the transaction. Additionally, I understand and agree that such creditors may release information about their credit experiences with me and forward this application to other creditors for the purpose of evaluating this application. I authorize the dealer and such creditors to make inquiries and obtain information about my credit and employment history, including obtaining credit reports, for the purpose of evaluating this application and any update, refinancing, modification, or enforcement of the credit received. I further authorize anyone receiving a copy of this application to provide such information to the requesting creditor. If I provide my e-mail address on this application, I agree that any communications to me from any of the parties to this transaction may be affected by e-mail.

X	_____	X	_____
Applicant Signature	Date	Co-Applicant Signature	Date

SECTION F: DEALER USE ONLY

Lender Program	<input type="checkbox"/> New <input type="checkbox"/> Used	Year	Make	Model	Mileage	
MSRP/Whls Val \$	Invoice \$	VIN (last 8)	Loan Amt/Cap Cost \$	Down Pmt \$	Requested Pmt \$	Term
Trade-In Equity \$	Trade-In Lienholder			Payoff Balance \$	Payment \$	