

Credit Application for: ☐ Retail ☐ Lease ☐ Balloon

PLEASE PRINT — INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

You may apply for credit in your name alone, whether or not you are married.

- (4) If you are married and live in a community property state, or any property that will secure this credit is located within a community property state, please provide information about your spouse in the "Co-Applicant" section (even if this application is in your name alone).

Will Applicant(s) be principal driver/operator? ☐ YES ☐ NO.

The vehicle being applied for will be used primarily for: (check one)

☐ Personal, family or household use. ☐ Business, commercial, or agricultural purposes, or you are an organization or governmental entity.

APPLICANT INFORMATION

Last Name		First Name		Middle		Birthdate		Social Security No.	
Address (Residence)				City		State	Zip	How Long: ____ Yrs. ____ Mos.	
								Drivers License No.	
Home Phone		Cell Phone		Mailing Address (if different from Home Address)				City	
								State	Zip
Residential Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Buying <input type="checkbox"/> Parents <input type="checkbox"/> Other _____								Monthly Rent/Mtg. Pmt. \$ _____	
Previous Full Address (if less than 3 years)						How Long: ____ Yrs. ____ Mos.		E-Mail Address:	

EMPLOYMENT and INCOME INFORMATION: Note - Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered as a basis for repaying this obligation.

Employer Name / <input type="checkbox"/> Self-Employed	Monthly Income: \$	Length of Employment ____ Yrs. ____ Mos.	Occupation
	Other Income: \$ Source:		
Current Work Phone Number	Previous Employer Name (If less than 3 years)	Length of Employment ____ Yrs. ____ Mos.	Occupation

CO-APPLICANT INFORMATION - This Person is a: ☐ Spousal Joint Applicant ☐ Joint Applicant ☐ Co-signer/Guarantor ☐ Non-Applicant Spouse

Last Name		First Name		Middle	Birthdate	Social Security No.	
Address (if different than Applicant's)				City	State	Zip	How Long: ____ Yrs. ____ Mos.
						Drivers License No.	
Home Phone	Cell Phone	Mailing Address (if different from Home Address)				City	State
						Zip	
Residential Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Buying <input type="checkbox"/> Parents <input type="checkbox"/> Other _____						Monthly Rent/Mtg. Pmt. \$ _____	
Previous Full Address (if less than 3 years)					How Long: ____ Yrs. ____ Mos.	E-Mail Address:	

EMPLOYMENT and INCOME INFORMATION: Note - Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered as a basis for repaying this obligation.

Employer Name / <input type="checkbox"/> Self-Employed	Monthly Income: \$	Length of Employment ____ Yrs. ____ Mos.	Occupation
	Other Income: \$ Source:		
Current Work Phone Number () -	Previous Employer Name (If less than 3 years)	Length of Employment ____ Yrs. ____ Mos.	Occupation

CREDIT and DEBT INFORMATION: If you are married and live in a community property state, or any property that will secure this credit is located in such, the Seller/Lessor and AHFC* will assume that all assets and income are community property and all debts are community obligations, unless you indicate otherwise on this application.

Bank Reference: _____ Account No.: _____ ☐ Checking ☐ Savings

Type of Loan: ☐ Mortgage Payment: \$ _____ Balance: \$ _____ Creditor: _____

☐ Auto Payment: \$ _____ Balance: \$ _____ Creditor: _____

Has any party to this application been the subject, or subject to bankruptcy proceedings? ☐ Yes ☐ No Explain, if yes. _____

Has any party to this application ever obtained credit under a different name? ☐ Yes ☐ No If so, What name? _____

Had a vehicle repossessed? ☐ Yes ☐ No If so, explain: _____

References

Nearest relative not living with you:			
Name	Address	Phone	Relationship to Applicant
List 2 additional references:			
Name	Address	Phone	Relationship to Applicant

Please read and sign below: By my signature below, I certify that I have completed this application to obtain credit, and that all information provided by me for this application is true, correct and complete. I understand and agree that this application and related credit information will be forwarded to AHFC* (or other financial institution if shown below), and AHFC* may be asked to buy the retail installment contract or lease involved in this transaction. I authorize AHFC* to communicate the reason(s) for action taken on this application to the Dealer named below. I authorize the Seller/Lessor, and AHFC* (collectively "You") to make inquiries and obtain information about me as You deem appropriate for the purpose of evaluating this application, and for any update, renewal, or extension of the credit received, including obtaining credit reports, contacting my credit references and/or my employer, and contacting any person or department about my driving record. I also authorize You to provide credit information about this transaction to others for the purpose of initiating, monitoring, and other purposes related to this account. I authorize You to give a copy of this application to anyone who has agreed to pay debts incurred on the basis of this application. If I provided my e-mail address on this application, I agree that any communications and correspondence to me from any of the parties to this transaction may be effected by e-mail.

*AHFC means and includes American Honda Finance Corporation and Honda Lease Trust, 20800 Madrona Avenue, Torrance, CA 90503

You are notified that your application may be submitted to (Name and Address required):

Applicant's Signature _____ Date _____ Co-Applicant's Signature _____ Date: _____

DEALER SECTION

Dealer Name			Dealer #:		Dealer Contact Person:		
Honda/Acura Customer: <input type="checkbox"/> Yes <input type="checkbox"/> No		Year	Make		Model #		MSRP
AHFC* Customer: <input type="checkbox"/> Yes <input type="checkbox"/> No							
Loyalty: <input type="checkbox"/> Yes <input type="checkbox"/> No		Term:	Income		Estimated Payments	Cap. Cost Red.	Adj. Cap. Cost
					\$		
Sales Program:	<input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Certified	Cash Price:	Sales Tax:	Cash Down:	Trade-In Amount	Amount Financed	
	Miles:						