



APPROVAL APPLICATION

Proof of income Proof of residence Proof of insurance Driver's license Cash down payment (No checks)

APPLICANT INFORMATION

Name: (first)			(middle)			(last)		
Date of birth:			Phone:			Email:		
SSN#:			Cell:			D.license#		
Current address:								
City:			State:			ZIP Code:		
Own Rent (Please circle)			Landlord:			How long? (months)		
Monthly payment:			Phone:					
Previous address (if less than 3years at current):								
City:			State:			ZIP Code:		
Owned Rented (Please circle)			Landlord:			How long? (months)		
Monthly payment:			Phone:					

EMPLOYMENT INFORMATION

Current employer:								
Employer address:						How long? (months)		
City:			State/Zip code:			Weekly income:		
Position:			Supervisor:			Phone:		
Previous employer (if less than 3years at current):								
Address:						How long? (months)		
City:			State/Zip code:			Weekly income:		
Position:			Supervisor:			Phone:		
Additional income:								

REFERENCES

(friends, family, co-workers)not residing with you

Name:			Phone:			Relationship:		
Current address:								
City:			State:			ZIP Code:		
Name:			Phone:			Relationship:		
Current address:								
City:			State:			ZIP Code:		
Name:			Phone:			Relationship:		
Current address:								
City:			State:			ZIP Code:		

CURRENT/LAST AUTO LOAN

Finance Company	Year/Make	Model	Balance

Everything that I have stated in this application is correct to the best of my knowledge. I authorize Dockter Motors Inc. to verify the information provided on this form as to my credit and employment history. I understand that you will retain this application whether or not it is approved.

Signature of applicant			Date		
------------------------	--	--	------	--	--