

(Please Print Clearly)

CREDIT APPLICATION Purpose of loan		Program No			
		Amount requested		% Rate %	Months
APPLYING FOR CREDIT			INDIVIDUAL	☐ JOIN	T
APP	LICANT			CO-APPLICAN	Γ
iver's License	Issue Date	I	Oriver's License	Iss	ue Date
	Expiration				oiration
Social Security Number	Date of Birth		Social Security Number	Date of Birth	
Home Phone Number ()	Cell Phone Number ()		Home Phone Number ()	Cell Phone Numl ()	per
First Name Middle	Last Name		First Name	Middle Last	Name
Street Address			Street Address		
City State	Zip Code		City	State Zip	Code
Monthly Mortgage Payment Home \$	Value Time at Residence Yrs. Mos.		Present Employer	C	ity/State
Mortgage Company	☐ Own ☐ Rent		Occupation	Work Phone Num ()	ber
Previous Residence (if above is less than two	years) Time at Residence Yrs. Mos.		Gross Monthly Salary		ength of Employment 'rs. Mos.
Present Employer	City/State			ort or seperate maintenance income r have it considered as a basis for repa	
Occupation	Work Phone Number ()		Other Income / Source		Monthly Amount
Gross Monthly Salary	Length of Employme Yrs. Mos.	ent			
Previous Employer	City / State		PE	RSONAL REFERENC (Not Living With You)	ES
Phone Number ()	Length of Employme Yrs. Mos.	ent	Name	(,	
	naintenance income need not be reveale red as a basis for repayinf this obligation		Relationship	Phone Number	
Other Incomes / Source	Monthly Amount \$		Name		
Has applicant declared Bankruptcy? ☐ Yes ☐ No	Date Filed		Relationship	Phone Number ()	
Credit References			Name	, ,	
Email Address			Relationship	Phone Number	
y Signing this application you promit hether or not to extend credit to you eller and/or assignee to release informatices phone. EREDIT REPORT NOTICE pplication for credit, extocount. On your request ddress of the credit reported.	a. You authorize a full investigation about credit experience was a credit experience was a credit experience was a credit, modify away will inform you if orting agency that fur	on and release of with them. You of redit reporting the ter such a repnished the	of your credit record and consent to receiving aut t for any legitima rms of your credi ort was ordered report.	your employment history. Yo odialed message calls from us ate purpose associa it agreement, or coll and will give you th	u also authorize the or our agents on y ted with you ection on yo e name and
		_	Applicant Sigi	nature: Date:	
ealer Rep:		_	Co-Annlicant	Signature:	
ALKA 4-LIFE, LLC.			co Applicant	Date:	

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