



CREDIT FORM

Please print this form, fill it out and then sign it. When completed, fax it to us at 519-744-1638 or scan and email it to sales@gaschoauto.com. We will call you as soon as we have the good news. We will keep all the information confidential.

CONTACT INFORMATION

Name _____
Address _____ Years of Residency _____
Previous Address _____ Years of Residency _____
Birthdate (MM/DD/YY) _____ Marital Status _____
Sin # _____ Driver's License # _____
Home Phone # _____
Work Phone # _____

HOME INFORMATION

Mortgage/Rent Payment (\$) _____ Mortgage Amount (\$) _____
Property Value (\$) _____ Mortgage/Landlord Name _____

EMPLOYMENT INFORMATION

Employer _____ Date Employed _____
Address _____
Job Title _____
Gross Monthly Income (\$) _____
Previous Employer _____ Date Employed _____
Additional Income _____
Debts, Credit Cards, Etc _____

BANK INFORMATION

Bank _____ Branch Account # _____
Have you ever been declined for credit? Yes No Why? _____

VEHICLE INFORMATION

Year _____ Make _____ Model _____
Serial # _____
New or Used _____ KMs _____
Options _____
Selling Price (\$) _____ Cash Down/Trade (\$) _____
Amount to Finance (\$) _____ Max Monthly Payments _____
Term _____ Black Book Price (\$) _____ Clean/Avg _____

SIGNATURE

I certify that the above information accurate, and I authorize an investigation of my credit history and the release of information about my credit experience.

Date _____ Signature _____ CO-Signature _____