## HONDA



## **CREDIT APPLICATION**

PLEASE PRINT — INCOMPLETE	APPLICATIONS WI	ILL NOT BE	E PROCES	SSED.										
INSTRUCTIONS: You may apply				r or not you are married		(AZ, CA, II	D, LA, NM,	NV, TX, V	VA, WI), or b	this is a joint	applicat	ion, or c) th	nis is an	
(1) Will Applicant(s) be principa If No, then Name			□ NU		(5)	If you are	applying fo	r credit w	ith another p	IED □ UNN oerson, p <b>l</b> ease	complet	te all sectio	ons.	
D.O.B	Relationship				(6)	If you are this credit	married an	d live in a within a d	community	property state	, or any p please p	oroperty the rovide info	at will secure rmation about	
(2) Please indicate whether you	are applying 🔲 Ir	ndividua <b>ll</b> y	y, or 🗆 V	With another person.		your spou	se in the "C	Co-Applica	ant" section	even if this ap	plication	n is in your	name alone).	
(3) We intend to apply for joint of	credit	. 1 1				□ Person	e collateral being applied for will be used primarily for: (check one)  Personal, family or household use.   Business, commercial, or agricultural purposes,							
	Applicant	t Initials	Co	o-Applicant Initials		or you are	an organiz	ation or g	overnmental	entity.				
				APPLICAN'		RMATIO	N							
Last Name	First Name			V	Middle		Birthdate				Social Security No.			
Address (Residence)		Unit/Apt.i	#	City	State	<u></u>	ZIP		How Long:YrsMos.		Driver's License No.		0.	
Home Phone Cell	Phone	Mai	iling Addı	ress (if different from R	esidend	e)			City			State	ZIP	
Residential Status:   Own	Rent 🗆 Parents	☐ Other	r						'	Monthly Rei	Monthly Rent/Mtg. Pmt. \$			
Previous Full Address (If less tha	n 3 years)				How Long:			_ Mos.	Email Address:					
		nony, child support, or separate maintenance income need								e it considered as a basis for repaying this obligation.				
Employer Name /  Self-Emplo	oyed	Monthly Income: \$				Lengt	Length of Employment			Occupation				
		Other Income: \$ Source:					Yrs Mos.							
Employer Phone Number		Previous Employer Name (If less than 3 years)					Length of Employment Yrs. Mos.			Occupation				
CO-APPLICANT INFOR	MATION - This p	erson is	a:	Spousal Joint Appli	cant	Joint	t Applican	nt C	o-signer/G	uarantor	Non-	Applican	t Spouse	
Last Name	First Name			N	Middle				Birthdate		Social S	Security No	).	
Address (If different than Applica	ant's)	Unit/Apt	t.#	City	State	<b>:</b>	ZIP		How Long:		Driver's	License No	0.	
Home Phone Cell	Phone	Mai	iling Addı	l ress (if different from R	esidend	e)			Yrs.	Mos		State	ZIP	
Residential Status: Own	Rent Parents	l □ Other	r							Monthly Rei	nt/Mtg. F	l Pmt. \$		
Previous Full Address (If less tha	n 3 years)					How	How Long:			Email Address:				
EMPLOYMENT and INCOME INFOR	MATION: Note - Alim	ony, child s	support, or	separate maintenance in	ncome no		_Yrs revealed if y		:hoose to have	e it considered	as a basis	for repayin	g this obligation.	
Employer Name /   Self-Emplo		Monthly Income: \$					Length of Employment			Occupation				
		Other Income: \$					Yrs Mos.							
Employer Phone Number		Source: Previous Employer Name					Length of Employment			Occupation				
	(If less than 3 years)						Mos.							
CREDIT and DEBT INFORMAT AHFC* will assume that all a	TION: If you are m ssets and income	narried ar e are com	nd live in nmunity	n a community prope property and all debt	erty sta ts are c	te, or any communit	property t ty obligati	that will ons, unle	secure this ess you indi	credit is loc cate otherw	ated in ise on t	such, the his applic	Seller and ation.	
Bank Reference:	Account No.:					Creditor:				☐ Checking ☐ Savings				
Type of Loan: ☐ Mortgage ☐ Auto	Payment: \$ Payment: \$			ince: \$ ince: \$		Credi Credi	itor: itor:							
Has any party to this application	been the subject, of	or subject t	to bankru	iptcy proceedings?	Yes 🗆	 ∃ NoI	lf yes, expla	ain:						
Has any party to this application Had a vehicle repossessed?		lit under a yes, explai		name?  Yes  N	o <b>I</b> f	yes, what	name?							
nau a venicie repossesseu!	TES LINU II	уез, ехріаі		REFEREN	ICES (R	lequired)								
Nearest relative not living w	ith you:			HEI EHEN	IOLO (II	iequireu/								
Name Address				Phone				Relationship						
List 2 additional references:														
Name	ess					Phone				Relationship				
Name Address						Phone						Relationship		

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 Applicant's Initials: \_\_\_\_\_\_ / Co-Applicant's Initials: \_\_\_\_\_\_ HMC CRDAPP 12/15

Please read and sign below: By your signature below, you certify that you have completed this application to obtain credit, and that all information provided by you for this application is true, correct and complete. You understand and agree that this application and related credit information will be forwarded to AHFC\* for other financial institution if shown below), and AHFC\* may be asked to buy the retail installment contract or lease involved in this transaction. You authorize AHFC\* to share the results of any credit report, credit investigation, or employment investigation (including the information contained in this application) with the Dealer named below and any other person assisting you in a loan/extension of credit. You also authorize the Dealer to receive copies of such reports and investigations to: (1) assist you in a loan/extension of credit and (2) search for financing with third party lenders on your behalf. You authorize the Seller/Lessor, AHFC\* and any affiliate, agent, service provider or assignee of AHFC\* (collectively "We", "Us" and "Our") to make inquiries and obtain information about you as We deem appropriate, including obtaining credit reports, contacting your credit references and/or your employer, investigating your credit and employment history, and contacting any person or department about your driving record. You also authorize Us to provide credit information about this transaction to others for the purpose of initiating, monitoring, and servicing your account, and for other legally permissible purposes. You authorize Us to give a copy of this application to anyone who has agreed to pay debts incurred on the basis of this application. If you provided your e-mail address on this application, you agree that any communications and correspondence to you from any of the parties to this transaction may be effected by e-mail. You agree that if an account is created for you, all of the following will also apply: (a) AHFC\* may monitor and record telephone calls regarding your account to a

You are notified that your application may be submitted to (Name an	d Address required):								
Applicant's Signature:	Date:	Co-Applicant's Signature:	Date:						
STATE NOTICES — California Residents: If married you may apply for a separate account. Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all credity or the credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.									

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.

Married Wisconsin Residents: No agreement, unilateral statement or court decree relating to marital property adversely affects a creditor's interest unless prior to the time credit is granted the creditor is furnished

Married Wisconsin Residents: No agreement, unilateral statement or court decree relating to marital property adversely affects a creditor's interest unless prior to the time credit is granted the creditor is furnished a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision. If the credit for which you are applying is granted, your spouse will also receive notification that credit has been extended to you. New York, Rhode Island and Vermont Residents: Consumer reports (credit reports) may be obtained in connection with this application. If you request: 1) You will be informed whether or not consumer reports were obtained; you will be informed of the names and addresses of the consumer reporting agencies (credit bureaus) that furnished the reports. If this application for credit is approved, you authorize AHFC\* to request and use subsequent consumer reports in connection with (a) renewals or extensions of this credit; (b) reviewing your credit; (c) for the purpose of taking collection action on this extension of credit; or (d) other legitimate reasons associated with this extension of credit.

## **NOTICE OF MAILING OF PRIVACY NOTICES**

**PRIVACY NOTICE:** AHFC Privacy Notice will be mailed to the applicant at the address provided in this credit application five to ten days after funding. The Privacy Notice is also available at http://www.hondafinancialservices.com/account-management/printable-forms.

			DEALER SE	CTION				
Dealer #:			Base Price \$					
Dealer Name:				Tax/Title/License \$				
Dealer Contact:				Accessories \$				
Sales Program:				Net Trade \$				
Complete Honda Model ID#:	Cash Down Payment \$							
Rate: Term:				Requested Amount \$				
Additional Asset Description	Year	Make/Model		VIN/HIN		Invoice Amount		MSRP
Asset #1:								
Asset #2:								
Asset #3:		-						

<sup>\*</sup>AHFC means and includes American Honda Finance Corporation, 20800 Madrona Avenue, Torrance, CA 90503

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