



LOAN APPLICATION

Admiral Motors, Inc
400 W Northwest Highway
Arlington Heights, IL 60004
Ph: 847-392-8000 Fax: 847-392-8001
contact@admiralmotors.com

TELL US ABOUT YOURSELF

If you intend to apply for individual credit complete all sections except the joint application section

Name: First	Middle Initial	Last	SS#		
Address (Number , Street)		City	State	Zip	Birth Date / /
US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	Own or Rent? <input type="checkbox"/> Own <input type="checkbox"/> Rent	Monthly Payment (Include,Insurance) / Monthly Rent			
Estimated Home Market value	Mortgage Balance		Mortgage Lien Holder		
Home Phone	Work Phone		Alternative Phone		
Previous Address (If Current is less than 2 years) - Number , Street, City, State, Zip					

TELL US ABOUT YOUR JOB

Employer Name			Years/ Months Employed		
Work Phone	Gross Monthly Pay	Occupation			
Other Gross Income	Source of Other Income				
Previous Employer (If Current is less than 2 years)				Years/ Months Employed	

TELL US ABOUT THE CAR

Car Year	Care Make	Car Model	Mileage	Purchase Price	
Amount to be Financed	VIN#	Term of Loan (in Months)			
					<input type="checkbox"/> 36-48 <input type="checkbox"/> 49-60 <input type="checkbox"/> 61-66 <input type="checkbox"/> 67-72

JOINT APPLICATION

By completing a this joint credit section, you acknowledge your intent to apply for joint credit

Name: First	Middle Initial	Last	SS#		
Address (Number , Street)		City	State	Zip	Birth Date / /
US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	Own or Rent? <input type="checkbox"/> Own <input type="checkbox"/> Rent	Monthly Payment (Include,Insurance) / Monthly Rent			
Previous Address (If Current is less than 2 years) - Number , Street, City, State, Zip					
Employer Name				Years/ Months Employed	
Work Phone	Gross Monthly Pay	Occupation			
Other Gross Income	Source of Other Income				