

Application Type:  Individual Business				Transaction Type:  Retail Lease Balloon					Deale	Dealer Number					
Last Name (or trade name of business)			First			Middle Initial	Middle Initial Suffix (Jr.)		f Birth	lirth Soc. Se		ec. # (or Tax ID #)			
Home (or business) Phone Nu	Ss) Phone Number Cell Phone Number			Type of Enterprise O C			orporation O ratheremp			ype of Business		Years in Business Years Months			
E-Mail Address			P	resent Addre	ess				Zij	p Code	City		•	State	
Time at Present Address  Years  Months  Residence Type  Owns Outrigh				right Buying Renting/Leasing Far					amily	Other		Monthly	/ Rent/Mortgag	e Payment	
limony, child support,	or separ	ate maintena	ince ince	ome need	I not be reveale	ed if yo	u do not wi	sh to have	e it cons	idered as a	basis fo	r repayi	ing this obli	gation.	
Present Job Title					Present Employer						Employ	er Phone	Number		
Time at Present Job Years Months			Gross Income					Ir	Income Received  Monthly  Yearly						
ast Name (or trade name of b	ousiness)			First			Middle Initial	Suffix (Jr.)	Date o	f Birth	Soc. Se	ec. # (or Ta	ax ID #)		
Home (or business) Phone Nu	imber	Cell Phone Numb	oer		Type of Enterprise	() Co		Partnership Proprietorsh		of Business			Years in Bu	siness	
E-Mail Address			P	Present Addre	ess				Zip	Code	City			State	
Years Months Alimony, child support, Present Job Title	or separa	C4054 94500 1450	s Outright	ome need	CONTRACTOR CONTRACTOR		ting/Leasing u do not wi	○ F		Other		or repayi	112	gation.	
Time at Present Job			Gross Inc	come					li	ncome Received			0 11		
Years N	Months									○ Mont	hly		O Yearly		
Intended Use Personal # of Units	O Business		VIN				Vehicle					Model			
New/Used			Style/Tri	m		Milea	age	Cyli	nders	Trade Vehi	cle Year	Trade Ma	ike		
	Oentified Used		Trade Model Cash S			sh Selling	Illing Price/Cap Cost			Taxes		Title/Lic./Reg./Other Fees			
O Auction			Cash Downpayment R			Reb	ebate Trade			Allowance Trade Ba			Balance Owe	d	
Special Programs  College Grad	○ Credit Line		Service/Maint. Contract			GAP			Other Insurance						
			Credit Li	edit Life Cr			edit Disability			Term Est. N		Est. Mo	Monthly Payment		
	SmartBeginnings Single Pmt, Lease		MSRP Wholesale (ED			ale (EDC	C/AWV)			Van Conversio	n/Upfit Co	ost Sec	curity Deposit		
We intend to apply for	joint cre	dit. Applicar	nt	- 8885 - 1841 - Alex	Co-Applicant	L		initials or	nly)						
See Page 2 for Impor Page 2.	rtant not	ices. By sig	gning b			e read	l and agree	e to the to	erms of	this applica	ation in	cluding			
Applicant's Signatu	ıre			[	Date		Co-Applic	ant's Sigr	nature				_ Date		

By signing this application, I certify that the information in my application is complete and true. I authorize the dealer, Ally Financial, Ally Bank, a/k/a Ally Capital in Hawaii, a/k/a Ally Capital Corp. in Mississippi, Montana, New Jersey, and Wisconsin, and a/k/a Ally Bank Corp. in New Mexico, to investigate my credit and employment history, obtain credit reports, and release information about their credit experience with me. If an account is created, I authorize the obtaining of credit reports for purposes of reviewing or taking collection action on the account or for other legitimate purposes associated with the account. I agree that you and any assignee of the financing contract or lease may monitor and record telephone calls regarding my account to assure quality of service or for other reasons. I agree that you and any assignee of the financing contract or lease may try to contact me in writing, by e-mail, or using prerecorded/artificial voice messages, text messages, and automatic telephone dialing systems, as the law allows. I also agree that you and any assignee of the financing contract or lease may try to contact me in these and other ways at any address or telephone number I provide, even if the telephone number is a cell phone number or the contact results in a charge to me.

## **CONSUMER NOTICES BY STATE**

Notice to California Residents: IF MARRIED YOU MAY APPLY FOR CREDIT SEPARATELY AS AN INDIVIDUAL.

Notice to Maine, Rhode Island, and Tennessee Residents: You must have physical damage insurance covering loss or damage to the vehicle for the term of any contract. For a lease, you must also have the liability insurance described in the lease. You may buy this insurance from anyone you choose. You do not have to buy it from someone affiliated with the dealer or an assignee of this contract. Your choice of insurance will not affect the credit approval process unless the insurance does not satisfy the contract requirements or the insurance company does not satisfy the reasonable standards of the dealer or an assignee of the contract.

Notice to New Hampshire Residents: If you are applying for a balloon payment contract, you are entitled, if you ask, to receive a written estimate of the monthly payment amount for refinancing the balloon payment in accord with the creditor's existing refinance programs. You would be entitled to receive the estimate before you enter into a balloon payment contract. A balloon contract is an installment sale contract with a final scheduled payment that is at least twice the amount of one of the earlier scheduled equal periodic installment payments.

Notice to New York Residents: Consumer reports may be requested in connection with this application. Upon request, you will be informed whether or not a consumer report was requested and, if it was, of the name and address of the consumer reporting agency that furnished the report. Additional consumer reports may be requested with respect to any extension or renewal of this obligation.

Notice to Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law.

Notice to Rhode Island Residents: Consumer reports may be requested in connection with this application.						
Notice to Wisconsin R	Residents:					
	☐ Married ☐ Unmarried (includes single, divorced, widowed) ☐ Separated					
If married or separated and spouse is not a co-applicant please provide:						
Non-applicant spouse's name						
Non-applicant spouse'	's address					
unilateral statement u	of the creditor will not be adversely affected by a provision and wisconsin Statutes § 766.59 or a court decree under Wich agreement, statement or decree to the creditor, or the cet is granted.	Visconsin Statutes § 766.70, unless you				
NON-APPLICANT SPOUSE'S WAIVER OF NOTICE: I agree to waive notice of any extension of credit in connection with this application.						
Non-applicant spouse s	signs (if available)	Date				
NEAREST RELATIVE	OR FRIEND NOT LIVING WITH YOU:					

NAME

ADDRESS

PHONE