

M.O.M.'s - Motorcycles of Manchester, Inc.

603-627-3957/FAX 603-627-3917

Year: _____ Make: _____ Model: _____ Purchase Amount: \$ _____ Finance Amount: \$ _____

Married applicants may apply for a separate account. Check the appropriate line below to indicate the type of credit for which you are applying.
 ___ **Individual Credit:** Complete applicant section. Complete other section as follows: (1) Information about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI) or your spouse will use the account. (2) Information about the party making payments if you are relying on alimony, spousal support, child support or separate/spousal maintenance as a basis for repayment.
 ___ **Joint Credit:** Provide information about both of you by completing Applicant and Joint Applicant sections.

Applicant

Last Name _____		First _____	MI _____	SINGLE / MARRIED _____		# OF Dependents: _____
Address _____		City _____	State _____	Zip Code _____	How Long? _____	
Home Phone # _____	Cell Phone # _____	Social Security # _____		Date of Birth _____		
Own / Rent / Parents / Other _____		Monthly Payment _____	Mortgage Company / Landlord _____	Email _____		
Previous Address (If less than 2 years) _____		City _____	State _____	Zip Code _____	How Long? _____	
Name of Employer _____		Self Employed Yes / No _____		Employer Phone # _____		
Employer Address _____		City _____	State _____	Zip Code _____		
Gross Income _____	Monthly / Annual _____	Title _____	Date of Hire _____	Additional Income / Source _____		
Previous Employer (If less than 2 years) _____		Title _____	Length of Employment _____			

Co-Applicant

Last Name _____		First _____	MI _____	Relationship to Applicant: _____		
Address _____		City _____	State _____	Zip Code _____	How Long? _____	
Home Phone # _____	Cell Phone # _____	Social Security # _____		Date of Birth _____		
Own / Rent / Parents / Other _____		Monthly Payment _____	Mortgage Company / Landlord _____	Email _____		
Previous Address (If less than 2 years) _____		City _____	State _____	Zip Code _____	How Long? _____	
Name of Employer _____		Self Employed Yes / No _____		Employer Phone # _____		
Employer Address _____		City _____	State _____	Zip Code _____		
Gross Income _____	Monthly / Annual _____	Title _____	Date of Hire _____	Additional Income / Source _____		
Previous Employer (If less than 2 years) _____		Title _____	Length of Employment _____			

Signatures

Applicant's Signature _____	Date _____
Co-Applicant's Signature _____	Date _____

* Notice: Alimony, child support or separate maintenance income need not be revealed if you do not choose to have it considered. If there are any important changes, you will notify us immediately. You also agree to notify us of any change in your name or employment within a reasonable time thereafter. You also promise that everything you have stated in this application is correct or to the best of your knowledge. You authorize Motorcycles of Manchester, Inc. and any other bank to obtain consumer credit reports on me periodically and to gather my employment history as they consider necessary and appropriate. If you request, the credit union or Motorcycles of Manchester, Inc. will tell you the name of any credit bureau from which they received a credit report on you. You understand that it is federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to Federal or State Chartered Credit Unions insured by the NCUA. Income will be verified.

Under fair lending requirements, Motorcycles of Manchester, Inc. does not discriminate in the granting, withholding, extending or renewing, or in the fixing of the rates, terms or conditions of, any form of credit, on the basis of race, color, national origin, sex, marital status, disability, familial status, religion or age.

Identity Verified By: _____