

Date _____

**MARINER
FINANCE****Personal
Finance
Company**

An affiliate of Mariner Finance

**Pioneer
Credit**
A subsidiary of Mariner Finance

Individual application _____ Joint application _____

Applicant Personal Information

First Name _____ MI _____ Last Name _____

Date of Birth _____ Social Security Number _____

Home Phone # _____ Cell Phone # _____

Applicant Present Address

Street, Box, RR _____

City _____ State _____ Zip _____

Time at address

Years _____ Months _____

Buying ☐ Renting ☐ Other ☐

Monthly Payment _____ Mortgage Balance _____ Home Value _____

Previous address if less than 3 years at current address

Street, Box, RR _____

City _____ State _____ Zip _____

Time at address

Years _____ Months _____

Applicant Present Employment

Employer _____ Position _____

Time at employer

Years _____ Months _____ Phone # _____

Gross Monthly Income _____ Net Monthly Income _____

Check One

Salary ☐ Hourly ☐ Self Emp ☐ Retired ☐**Previous employment if less than 3 years at current**

Employer _____ Position _____

Time at employer

Years _____ Months _____

Other Income

Alimony, child support or separate maintenance income need not be revealed if purchaser does not wish to have it considered as a basis of repaying this obligation.

Source of Income _____ Gross _____ Net _____

Co-Applicant Personal Information

First Name _____ MI _____ Last Name _____

Date of Birth _____ Social Security Number _____

Home Phone # _____ Cell Phone # _____

Co-Applicant Present Address Check ☐ if same as applicant

Street, Box, RR _____

City _____ State _____ Zip _____

Time at address

Years _____ Months _____

Buying ☐ Renting ☐ Other ☐

Monthly Payment _____ Mortgage Balance _____ Home Value _____

Previous address if less than 3 years at current address

Street, Box, RR _____

City _____ State _____ Zip _____

Time at address

Years _____ Months _____

Co-Applicant Present Employment

Employer _____ Position _____

Time at employer

Years _____ Months _____ Phone # _____

Gross Monthly Income _____ Net Monthly Income _____

Check One

Salary ☐ Hourly ☐ Self Emp ☐ Retired ☐**Previous employment if less than 3 years at current**

Employer _____ Position _____

Time at employer

Years _____ Months _____

Other Income

Alimony, child support or separate maintenance income need not be revealed if purchaser does not wish to have it considered as a basis of repaying this obligation.

Source of Income _____ Gross _____ Net _____

By signing below, you authorize us to make whatever credit inquiries and obtain such credit as we deem necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on this application. You authorize and instruct any person to complete and furnish to us any information that we may request and agree that such information, along with this application, shall remain our property whether or not credit is extended. You authorize us to disclose any information in or relating to this application and loan account if approved (including information received from third persons) to any applicant for, or guarantor of this credit to financial service providers we select to provide you with financial products and services we do not offer ourselves, and to any potential assignee, transferee, or participant in the credit to which this application relates. You represent that all application information is true. NY Residents: We may request credit reports, other than investigative consumer reports, and, if we do, upon your request you will be informed whether a credit report was requested, and if it was, of the name and address of the consumer reporting agency that furnished the report. This notice applies to subsequent credit reports that we may request in connection with any account reviews, updates, renewals, or extensions.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

For Dealer Use Only

Dealer name Spa City USAPhone 812-479-3161Fax 812-479-5888

Purpose of Loan _____ Purchase Price \$ _____ Down Payment \$ _____ Amount to Finance \$ _____

Applicant ID _____ State _____ DL # _____ Expires _____ Co-Applicant ID _____ State _____ DL# _____ Expires _____

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