

| DEALER N | NAME:_ | American Air Heating & Cooling Inc. |  |
|----------|--------|-------------------------------------|--|
| DEALER#  | 10     | 516                                 |  |

## **EXAMPLE** OF LOAN APPLICATION THAT IS TAKING OVER THE PHONE.

| AMOUNT              |  |
|---------------------|--|
| <b>REQUESTED \$</b> |  |

| APPLICANT #1  |                             |                   |          |              |           |  |  |  |  |  |
|---|-----------------------------|-------------------|----------|--------------|-----------|--|--|--|--|--|
| NAME SOCIAL SECURITY #  |                             |                   |          |              |           |  |  |  |  |  |
| STREET ADDRESS  |                             |                   |          | YEARS        |           |  |  |  |  |  |
| CITY  | OUNTY                       |                   |          | STATE        | ZIP       |  |  |  |  |  |
| PROPERTY OWNER ☐ YES ☐ NO TYPE OF RESIDENCE ☐ HOME ☐ DUPLEX ☐ CONDO ☐ MOBILE HOME |                             |                   |          |              |           |  |  |  |  |  |
| PREVIOUS STREET ADDRESS   |                             | YEARS             |          |              |           |  |  |  |  |  |
| PREVIOUS CITY STATE ZIP   |                             |                   |          |              |           |  |  |  |  |  |
| HOME PHONE ( )  | EQUIPMENT LOCATION ADDRESS: |                   |          |              |           |  |  |  |  |  |
| DATE OF BIRTH / /   | AGE PAYMENT                 | GE PAYMENT \$     |          |              |           |  |  |  |  |  |
| EMPLOYED BY   |                             | PHONE ( )         |          |              |           |  |  |  |  |  |
| EMPLOYER'S ADDRESS  |                             |                   |          |              |           |  |  |  |  |  |
| POSITION  |                             |                   |          |              |           |  |  |  |  |  |
| LENGTH OF EMPLOYMENT YEARS  |                             | SALARY \$_        |          | GROSS YEARLY |           |  |  |  |  |  |
| ADDITIONAL SOURCES OF INCOME  |                             |                   |          |              |           |  |  |  |  |  |
| 1)  | \$                          | \$                |          |              |           |  |  |  |  |  |
| HAVE YOU FILED BANKRUPTCY WITHIN THE LAST 10                                      | YEARS?                      |                   |          |              |           |  |  |  |  |  |
| NEAREST RELATIVE (OTHER THAN SPOUSE)  |                             |                   |          |              |           |  |  |  |  |  |
| ADDRESS   |                             |                   |          | PH           | PHONE ( ) |  |  |  |  |  |
| PERSONAL REFERENCE (NOT A RELATIVE)   | PH                          | PHONE ( )         |          |              |           |  |  |  |  |  |
| APP   | LICAN                       | T #2 (IF AP       | PLICABLE | :)           |           |  |  |  |  |  |
| NAME  |                             |                   |          |              |           |  |  |  |  |  |
| RELATIONSHIP  |                             | SOCIAL SECURITY # |          |              |           |  |  |  |  |  |
| CURRENT HOME ADDRESS  |                             |                   |          |              |           |  |  |  |  |  |
| CITY  |                             |                   | STATE    | ZIP          |           |  |  |  |  |  |
| HOME PHONE ( )  |                             |                   |          |              |           |  |  |  |  |  |
| DATE OF BIRTH / /   |                             |                   |          |              |           |  |  |  |  |  |
| EMPLOYED BY PHONE ( )   |                             |                   |          |              |           |  |  |  |  |  |
| LENGTH OF EMPLOYMENT YEARS MONTHS SALARY \$ GROSS YEARLY                          |                             |                   |          |              |           |  |  |  |  |  |