

Salesperson \_\_\_\_\_

Date \_\_\_\_\_



PO Box 160; Christiana, PA 17509  
610-593-5195

**Consumer Credit Application - Fax to 610-593-7492**

**SECTION A - INFORMATION ABOUT APPLICANT**

Name \_\_\_\_\_ Res. Phone \_\_\_\_\_

Street \_\_\_\_\_ Bus. Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell # \_\_\_\_\_ Fax # \_\_\_\_\_

E-mail address \_\_\_\_\_

Birthdate \_\_\_\_\_ Social Security # \_\_\_\_\_ How long at present address \_\_\_\_\_

Rents from \_\_\_\_\_  
Name and address \_\_\_\_\_

Directions for delivery \_\_\_\_\_

**EMPLOYMENT RECORD**

Present employer \_\_\_\_\_ How long \_\_\_\_\_ Earnings \_\_\_\_\_

Department \_\_\_\_\_ Supervisor \_\_\_\_\_ Tele. # \_\_\_\_\_

Former employer \_\_\_\_\_ How long \_\_\_\_\_ Earnings \_\_\_\_\_

Other income \$ \_\_\_\_\_ Source of other income \_\_\_\_\_

**SECTION B - INFORMATION ABOUT JOINT APPL. OR SPOUSE**

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Relationship to applicant \_\_\_\_\_ Social Security # \_\_\_\_\_

Present employer \_\_\_\_\_ How long \_\_\_\_\_ Earnings \_\_\_\_\_

Department \_\_\_\_\_ Supervisor \_\_\_\_\_ Tele. # \_\_\_\_\_

Former employer \_\_\_\_\_ How long \_\_\_\_\_ Earnings \_\_\_\_\_

**I / We are requesting a credit limit of \$ \_\_\_\_\_ ( Monthly volume)**

SECTION C - CREDIT REFERENCES

1. Bank name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Tele. # \_\_\_\_\_  
Fax # \_\_\_\_\_  
Type of account (s) and number \_\_\_\_\_

2. Bank name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Tele. # \_\_\_\_\_  
Fax # \_\_\_\_\_  
Type of account (s) and number \_\_\_\_\_

Contact person \_\_\_\_\_

Contact person \_\_\_\_\_

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1. Supplier Name \_\_\_\_\_ Tele. # \_\_\_\_\_  
Street address and / or mailing \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Supplier Name \_\_\_\_\_ Tele. # \_\_\_\_\_  
Street address and / or mailing \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Supplier Name \_\_\_\_\_ Tele. # \_\_\_\_\_  
Street address and / or mailing \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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How did you hear about us ? Newspaper \_\_\_\_ Radio \_\_\_\_ Yellow pages \_\_\_\_ Internet \_\_\_\_

Friend / Business with Walter and Jackson, Inc., Account name \_\_\_\_\_

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The above information is for the purpose of obtaining credit and I / we certify that the information is true and correct. I / we authorize you to verify this information and / or obtain additional information by obtaining data from credit references and reporting agencies.

In consideration for the credit extended to the above-listed person (s) , the undersigned hereby guarantees and agrees to be personally liable for all indebtedness and **18% A. P. R.** Finance Charges incurred by the person (s) listed above. If it becomes necessary to collect by retaining legal counsel, customer agrees to pay all reasonable attorney fees expended on such collection as an element of damages or to reimburse Walter and Jackson, Inc., for the same.

Principal's signature \_\_\_\_\_ Spouse's Signature \_\_\_\_\_

Principal print name \_\_\_\_\_ Spouse print name \_\_\_\_\_