



PLEASE PRINT PLAINLY

Merchant Fax Number ( ) - Cannot process without fax number.

Sales Person ID

Amount of Credit Requested

Date: / /

FAILURE TO PROVIDE THE AMOUNT OF CREDIT REQUESTED MAY RESULT IN AN INSUFFICIENT CREDIT LIMIT ASSIGNMENT.

Last Name First Name MI Suffix

Date of Birth Social Security Number Home Phone

Present Address (Street Address, including Apartment Number if applicable or P.O. Box Number)

City State Zip Alternate Phone

Time At Address Yrs. Mos. Buying Rent Value Of Home Mortgage Balance Mo. Rent/Mtg. Pmt. Own

TYPE OF EMPLOYMENT Full Time Self Employed Part Time Retired Time At Employer Yrs. Mos. PRESENT EMPLOYER (Name of Company) Occupation or Title Employer's Phone

NOTE: Alimony, Child Support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Income from all sources Gross Monthly Net Annual I would like to receive information about SLFS special offers and promotions at this email address. I do not want to receive information about SLFS special offers and promotions at this email address.

Email Address

Credit Applied For: Joint Individual (A married applicant may apply for an individual account.)

Last Name of Co-Applicant First Name MI Suffix

Date of Birth Social Security Number Home Phone

If present address and phone number are the same as above, check here: Relationship to Applicant: Spouse Non-spouse

Present Address (Street Address, including Apartment Number if applicable or P.O. Box Number)

City State Zip Time At Address Yrs. Mos. NOTE: Alimony, Child Support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

PRESENT EMPLOYER (Name of Company) Income from all sources Gross Monthly Net Annual

Time At Employer Yrs. Mos. Occupation or Title Employer's Phone

**APPLICANT/JOINT APPLICANT : Please read and sign below.**

Seller will submit your application to Springleaf Financial Services, Inc. (SLFS), P.O. Box 59, Evansville, IN 47701, or its affiliate, which may buy your-Retail Installment Sales Contract. If this application is not approved by Springleaf Financial Services, Inc. (SLFS), you authorize SLFS and/or the merchant to furnish all of your application information to other possible financing sources, including affiliates of SLFS, for credit programs other sources may offer and you authorize such other sources to make inquiries about you they consider necessary or desirable (including obtaining your consumer report from consumer reporting agencies) in evaluating you for credit. You understand that the terms and conditions of credit extended by another lender may differ from the terms and conditions of the credit for which you originally applied. You are not obligated to accept an offer from our affiliate or any other creditor.

SLFS may share with its affiliates any information regarding you or your application, acceptance, or credit experience with SLFS. However, you may request that this information not be shared with affiliates by notifying SLFS by mail or phone at the location shown above or by initialing this box:     
Please DO NOT share information about me with your affiliates.

SLFS may investigate your creditworthiness (including obtaining credit reports and verifying employment information). SLFS may request a consumer report from consumer reporting agencies in considering your credit application. SLFS may use any credit report obtained in connection with this application for future credit offers.

**FROM TIME TO TIME, SLFS WILL NOTIFY YOU WHEN ADDITIONAL FINANCIAL SERVICES ARE AVAILABLE, BY TELEPHONE AND/OR MAIL, AND THAT SUCH SERVICES MAY INCLUDE NEGOTIABLE CHECKS WHICH YOU MAY ENDORSE TO OBTAIN A LOAN, OR DESTROY IF YOU DO NOT WISH TO ACCEPT THE LOAN OFFER. IF YOU DO NOT WISH TO RECEIVE THESE SOLICITATIONS, PLEASE STRIKE AND INITIAL THIS PARAGRAPH.**

**NEW YORK, OHIO, AND WISCONSIN RESIDENTS: SEE REVERSE SIDE FOR IMPORTANT INFORMATION.**

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Applicant's Signature	Date	Co-Applicant's Signature	Date
Seller's Name	Seller's Merchandise		

Drivers License #

Agent

233849

19941

**MERCHANT USE ONLY**

069-00116A Retail and Home Solicitation Application (REV. 3-11)

**NOTICE TO NEW YORK RESIDENTS:**

Upon your request, we will inform you whether or not we requested a consumer report on you and the name and address of the consumer reporting agencies that furnished such reports.

**NOTICE TO OHIO RESIDENTS:**

The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy 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 OF WISCONSIN RESIDENTS:**

No provision of any marital property agreement, a unilateral statement under §766.59 Wis. Stats. or a court decree under §766.70 Wis. Stats. adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the creditor is incurred.

In addition, if I have applied for individual credit and I am married, I must send you the name and address of my spouse within 15 days so that you can provide my spouse with the disclosure required under Wisconsin law.