



LEASE APPLICATION

APPLICANT INFORMATION:

First Name:		Middle Name		Last Name:	
Address: (No P.O. Boxes)		City	State	Zip Code	Years at this address?
Driver's License #	State	Social Security #		Date of Birth:	
		- -		/ /	
Employer (Company Name)		Employer's Address		Years of Employment?	
				Years:	Months:
Your Position:					
Salary	Please circle one:	Employer's Telephone Number		Alimony/Child Support	
\$	Wkly/Bi-Wkly/MO			\$ Monthly Amt.	
Email		Cell Phone		Home Phone	

CO-APPLICANT

First Name:		Middle Name:		Last Name:	
Address:		City	State	Zip Code	Relationship to Applicant:
Driver's License #	State	Social Security #		Date of Birth:	
		- -		/ /	
Employer:		Address		Years of Employment?	

ASSET OR DEBT INFORMATION

Name of Mortgage Company or Rent Company:	Mortgage Payment or Rent:	Rent or Own
	\$	Rent ____ Own ____
Current Car Loan - Bank Name:	Monthly Payment:	Balance on Loan:
	\$	\$
Personal Bank Account - Bank Name:	Checking/Savings Acct.#	Current Bal.
		\$
Have you had any Bankruptcies or Vehicles Repo	Year of Bankruptcy or Repo:	Amount Owed
		\$

Credit Authorization: I/We hereby authorize Titan Capital Group, its designee, or employees to review my/our personal credit profile provided by national credit bureaus in considering this application and for the purpose of updating, reviewing, extending additional credit or the collection of any late account. I/We hereby authorize our references to release all information about me and I/we represent and warrant that the information submitted herein is true, complete and accurate. I/We also agree to furnish financial statements and/or tax returns upon request. A facsimile, electronic or other copy of this authorization shall be as valid as the original.

X _____

Applicant

_____ Co-Applicant

_____ Date

REFERENCES (PLEASE PROVIDE SIX FRIENDS OR RELATIVES (NOT LIVING WITH YOU))

Name:
Address: _____ City: _____ State: _____ Zip Code: _____
Home Telephone: _____ Cell Phone: _____
Relationship to Applicant:

Name:
Address: _____ City: _____ State: _____ Zip Code: _____
Home Telephone: _____ Cell Phone: _____
Relationship to Applicant:

Name:
Address: _____ City: _____ State: _____ Zip Code: _____
Home Telephone: _____ Cell Phone: _____
Relationship to Applicant:

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Home Telephone: _____ Cell Phone: _____
Relationship to Applicant:

Name:
Address: _____ City: _____ State: _____ Zip Code: _____
Home Telephone: _____ Cell Phone: _____
Relationship to Applicant:

VEHICLE INFORMATION: (TO BE FILLED OUT BY DEALERSHIP)

Dealer/Supplier:	Representative's Name	Representative's Phone#
Equipment Description:	Equipment Cost:	Customer Deposit Amount:
Make: _____	\$ _____	\$ _____
Model:		
Vehicle Information:	Requested Term:	VIN #
Color: _____	_____ Months	# _____
New _____ or Used _____ Year _____		