

Application Type:		Transaction Type:					Dealer Number						
O Individual O Business		○ F	Retail O	Lease C	Balloon								
Last Name (or trade name of business)		First		Midd	e Initial Suf	ffix (Jr.)	ate of Birth	Soc. S	Sec. # (or T	Γax ID #)			
Home (or business) Phone Number Cell Phone Number		Type of Enterprise Corporation Partnersh				Type of Business			Years in Business Years Months				
E-Mail Address		Present Add	Iress				Zip Code	City			State		
Time at Present Address Years Months	ght C	Buying Renting/Leasing Family					Other Mont			nthly Rent/Mortgage Payment			
limony, child support, or separat	544 56		E) 0(((20, 14, 14)	5 5	936 9	D 2 S	or repayi	ing this obli	gation.		
Present Job Title		2	Present Employer					Emplo	yer Phone	Number			
Fime at Present Job Years Months	Gross	Gross Income					Income Received Monthly Yearly						
ast Name (or trade name of business)		First		Midd	e Initial Suf	ffix (Jr.)	ate of Birth	Soc. S	ec. # (or T	Γax ID #)			
	ell Phone Number		Type of Enterprise Corporation Partnership			SHOPHIC MECTY	Type of Busines			Years in Bu	siness		
E-Mail Address		Present Add	iress				Zip Code	City			State		
Fime at Present Address Years Months	esidence Type Owns Outrig	ght C	Buying	O Renting/Le	asing	O Family	Oot	her	Monthly	y Rent/Mortgag	e Payment		
limony, child support, or separat	e maintenance i	ncome nee	d not be revea	led if you do	not wish to	o have it c	considered as	a basis fo	or repayi	ing this obli	gation.		
Present Job Title			Present Employer				all a	Emplo	yer Phone	Number			
Time at Present Job Years Months Gross Incom			icome					Income Received Monthly Yearly					
Intended Use Personal Business	VIN					Vehicle Y	'ear Make			Model			
# of Units		Style/Trim			Mileage Cylinders		Trade \	Trade Vehicle Year		Frade Make			
○ New ○ Demo ○ Used ○ Certified U		Trade Model Cash S			Selling Price/Cap Cost			Taxes		Title/Lic./Reg./Other Fees			
Auction	Cash Do		Downpayment		Rebate		Trade Allowance	8	Trade Balance Owed				
ABC - 60 mos.		Service/Maint. Contract			GAP			Other Insurance					
		it Life	Credit Dis	Credit Disability			Term		Est. Monthly Payment				
		P	esale (EDC/AWV)	(EDC/AWV)			Van Conversion/Upfit (Cost Security Deposit				
We intend to apply for joint cred	it. Applicant		_ Co-Applica	nt	(initi	ials only)							
See Page 2 for important notice Page 2.	ces. By signing	j below, I c	certify that I ha	ave read and	agree to	the term	s of this app	lication in	ncludin	g terms on			
Applicant's Signature			Date		Applicant'	s Signatu	re			_ Date _			

By signing this application, I certify that the information in my application is complete and true. I authorize the dealer, Ally Financial, Ally Bank, a/k/a Ally Capital in Hawaii, a/k/a Ally Capital Corp. in Arizona, Mississippi, Montana, New Jersey, and Wisconsin, and a/k/a Ally Bank Corp. in New Mexico, to investigate my credit and employment history, obtain credit reports, and release information about their credit experience with me. If an account is created, I authorize the obtaining of credit reports for purposes of reviewing or taking collection action on the account or for other legitimate purposes associated with the account. I agree that you and any assignee of the financing contract or lease may monitor and record telephone calls regarding my account to assure quality of service or for other reasons. I agree that you and any assignee of the financing contract or lease may try to contact me in writing, by e-mail, or using prerecorded/artificial voice messages, text messages, and automatic telephone dialing systems, as the law allows. I also agree that you and any assignee of the financing contract or lease may try to contact me in these and other ways at any address or telephone number I provide, even if the telephone number is a cell phone number or the contact results in a charge to me.

CONSUMER NOTICES BY STATE

Notice to California Residents: IF MARRIED YOU MAY APPLY FOR CREDIT SEPARATELY AS AN INDIVIDUAL.

Notice to Maine, Rhode Island, and Tennessee Residents: You must have physical damage insurance covering loss or damage to the vehicle for the term of any contract. For a lease, you must also have the liability insurance described in the lease. You may buy this insurance from anyone you choose. You do not have to buy it from someone affiliated with the dealer or an assignee of this contract. Your choice of insurance will not affect the credit approval process unless the insurance does not satisfy the contract requirements or the insurance company does not satisfy the reasonable standards of the dealer or an assignee of the contract.

Notice to New Hampshire Residents: If you are applying for a balloon payment contract, you are entitled, if you ask, to receive a written estimate of the monthly payment amount for refinancing the balloon payment in accord with the creditor's existing refinance programs. You would be entitled to receive the estimate before you enter into a balloon payment contract. A balloon contract is an installment sale contract with a final scheduled payment that is at least twice the amount of one of the earlier scheduled equal periodic installment payments.

<u>Notice to New York Residents</u>: Consumer reports may be requested in connection with this application. Upon request, you will be informed whether or not a consumer report was requested and, if it was, of the name and address of the consumer reporting agency that furnished the report. Additional consumer reports may be requested with respect to any extension or renewal of this obligation.

Notice to Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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 to Rhode Island Residents: Consumer reports may be requested in connection with this application.

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Notice to Wiscor	nsin Residents:					
Please Indicate:	 ☐ Married ☐ Unmarried (includes single, divorced, ☐ Separated 	widowed)				
If married or separated and spouse is not a co-applicant please provide:						
Non-applicant sp	oouse's name					
Non-applicant sp	ouse's address					
unilateral stateme	ent under Wisconsin Statutes § 766.59 or of such agreement, statement or decree	y affected by a provision of a marital property agreement, a a court decree under Wisconsin Statutes § 766.70, unless you to the creditor, or the creditor has actual knowledge of such				
NON-APPLICAN with this applicat		agree to waive notice of any extension of credit in connection				
Non-applicant spo	ouse signs (if available)	Date				
NEAREST RELAT	TIVE OR FRIEND NOT LIVING WITH Y	OU:				
NAME						
ADDRESS		PHONE				