EatZ & Associates

FINANCIAL APPLICATION

Personal Information			
☐ Single ☐ Married			
☐ Own/Buying Home ☐ Rent ☐ Live With Parent	ts Live With Relatives		
How Long at Present Address?			
Applicant	Applicant's Spouse		
Name	Name		
Home Address	Home Address		
City/State/Zip	City/State/Zip		
Home Telephone ()	Home Telephone ()		
Business Telephone ()	Business Telephone (
Social Security #	Social Security #		
Driver's License No	Driver's License No		
Mother's Maiden Name	Mother's Maiden Name		
Birthdate	Birthdate		
Have You Ever Filed for Bankruptcy?	Have You Ever Filed for Bankruptcy?		
Are You a U.S. Citizen?	Are You a U.S. Citizen?		
Educational Background			
Applicant	Applicant's Spouse		
High School	High School		
Last Grade Completed 8 9 10 11 12	Last Grade Completed 8 9 10 11 12		
College/University	College/University		
Major	Major		
Degree ReceivedYear	Degree ReceivedYear		
Employment/Business Data			
Applicant	Applicant's Spouse		
Current Employer	Current Employer		
Address	Address		
City/State/Zip	City/State/Zip		
Position	Position		
Present Salary (Gross Monthly)	Present Salary (Gross Monthly)		
Started (Year) To	Started (Year) To		
Description of Work	Description of Work		
Previous Employer(If Less than 5 Years)	Previous Employer(If Less than 5 Y		
Address	Address		
City/State/Zip	City/State/Zip		
Position	Position		
Present Salary (Gross Monthly)	Present Salary (Gross Monthly)		
Started (Year) To	Started (Year) To		
Description of Work	Description of Work		
<u>Previous Business Owner</u>			
Have you ever owned your own business? If so, give the following	g details:		
Business Name	How Long Owned?		
Type of Business	How Many Employees		
Address	Address		
City/State/Zip	City/State/Zip		
Describe how the business changed over the time you owned it (Ple	ease attach a separate sheet).		

Financial Information

ASSETS (I or We Own)	AMOUNT	LIABILITIES (I or We Own)	AMOUNT
Cash (checking) Acct. #		Notes Payable to Bank	
Name of Bank			
Cash (savings) Acct. #		Notes Payable to (Other-Give Name)	
Name of Bank			
Cash (Other) Acct. #		Accounts Payable to (give name)	
Name of Bank		1.	
Accounts Receivable		2.	
Stock and Bonds (please list below)		3.	
Notes Receivable		4.	
Cash Value Life Insurance		Taxes Payable	
Auto Year and Make		Amount Owed on Real Estate	
Auto Year and Make		Other Liabilities (describe)	
Real Estate (please list below)		1.	
Household Goods		2.	
Other Assets (describe)		3.	
1.			
2.			
3.			
Total Assets	\$	Total Liabilities	\$
Net Worth (Assets Minus Liabilities)	\$		
MONTHLY INCOME	AMOUNT	MONTHLY EXPENDITURES	AMOUNT
Salary Gross – Applicant		Real Estate Payments	
Salary Gross – Spouse		Rent	
Securities Income		Income Taxes	
Rental Income		Insurance Premiums	
Other Income (describe)		Property Taxes	
1.		Alimony, Child Support or Separate Maintenance	
2.		Other (include installment payments other than real estate)	
3.		1.	
		2.	
		3.	
		4.	
		5.	
Total Income	\$	Total Expenditures	\$
Net Cash Income (Income Minus Expenditures)			
STOCK AND BONDS			
			Current
Number of Shares/Amount of Bonds	Description	Name(s) of Owner(s) and How Held	Market Value

REAL ESTATE					
	Purchase		Estimated	Amount	To Whom
Property Address	Date	Name(s) of Owner(s) and How Held	Value	Owing	Payable

It is understood that the purpose of this questionnaire is to gather general information for the purpose of procuring the establishing credit from time to time with you and to induce you to permit the undersigned to become indebted to you and is in no way binding upon either Charles Dunn Company or its agents or representatives or the applicant. It is, however, understood that the applicant supplies the information contained herein to the best of his or her knowledge and ability.

I/We hereby authorize Charles Dunn Company or whomever they may appoint or any credit bureau, other investigation agency, or other financial institution, to investigate the references and statements submitted to obtain information regarding my/our employment, credit, bank and savings accounts(s) as needed to process our application.

The undersigned certifies that the above statement (or in lieu thereof, the attached statement, as the case may be) and supporting schedules, both prints and written, give a full, true and correct statement of the financial condition of the undersigned as of the date indicated.

Applicant's Signature_	Date
Applicant's Signature_	Date