Retail Motor Vehicle Credit Application

□ Credit Sale □ Lease

Application Number:

Date: 11/25/2015

Creditor Name and Address: Westlake Financial Services 4751 Wilshire Blvd. Suite 100 Los Angeles CA 90010 **TYPE OF CREDIT REQUESTED:**

□ Business □ Individual □ Joint—We intend to apply for joint credit (initials): The words "you" and "your" refer to each person or business submitting this application. The words "we", "us" and "our" refer to the seller and the financial companies to which your application is submitted. The words "married" and "spouse" include registered domestic partners or civil union where applicable. **IMPORTANT APPLICANT INFORMATION:** Federal law requires financial companies to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information

Complete JOINT	APPLICANT'S	section only	v if application	is for joint credit.

(A) APPLICANT'S INFORMATION					(B) JOINT APPLICANT'S INFORMATION							
PRINT FULL NAME			DOB			PRINT FULL	NAME			DOB		
SSN/TAXID	STR	EET ADDRE	SS		APT#	SSN/TAXID		STR	EET ADDRES	S		APT#
CITY		STATE	ZIP	HOW LONG YRS		CITY			STATE	ZIP	HOW LONG YRS	?MOS
HOME PHONE	CEL	L PHONE		MONTHLY RENT/M	IORTGAGE	HOME PHON	E	CEI	L PHONE		MONTHLY RENT/N	IORTGAGE
APPLICANT'S E-MAIL	ADDRESS			•		JOINT APPLI	CANT'S E-	-MAIL ADD	RESS			
RESIDENTIAL STATUS			OTHER	LANDLORD/N	MORTGAGE	RESIDENTIA				OTHER	LANDLORD/	MORTGAGE
LANDLORD PHONE	PREVIOUS	ADDRESS (f less than 2 yrs at	current address)	APT#	LANDLORD	PHONE	PREVIOUS	ADDRESS (if	less than 2 yrs at c	urrent address)	APT#
CITY		STATE	ZIP	HOW LONG YRS		CITY			STATE	ZIP	HOW LONG YRS	? MOS
CURRENT EMPLOYER GROSS MONTHLY SALARY				SALARY	CURRENT EMPLOYER GROSS MONTHLY SALARY							
CURRENT EMPLOYER	R'S ADDRESS	6	CITY		STATE	CURRENT EN	MPLOYER'	'S ADDRESS	5	CITY		STATE
ZIP WORK	PHONE	HOW L	ONG? (RS MOS	OCCUPATION/JO	B TITLE	ZIP	WORK F	PHONE	HOW LC	NG? RS MOS	OCCUPATION/JO	OB TITLE
PREVIOUS EMPLOYER (if less than 2 yrs at current job) PHONE GROSS MONTHLY SALARY				PREVIOUS EMPLOYER (if less than 2 yrs at current job) PHONE GROSS MONTHLY SALARY								
PREVIOUS EMPLOYER'S FULL ADDRESS HOW LONG?				PREVIOUS E	MPLOYER	'S FULL AD	DRESS		HOW LONG YRS	3? MOS		
SECONDARY EMPLOY	ER NAME (i	f applicable)	SECONDARY	EMPLOYER ADDRE	SS	SECONDARY	EMPLOYI	ER NAME (i	if applicable)	SECONDARY E	EMPLOYER ADDRE	SS
CITY		STATE	ZIP	GROSS MONTHL \$0.00		CITY			STATE	ZIP	GROSS MONTH	
SECONDARY EMPLOY	ER PHONE	HOW L	ONG? YRS <u>M</u> OS	OCCUPATION/JO	B TITLE	SECONDARY	EMPLOYI	ER PHONE	HOW LO	ONG? TRS MOS	OCCUPATION/JO	DB TITLE

OTHER INCOME NOTE:*

□ (A) or □ (B) GROSS MONTHLY OTHER INCOME	OTHER INCOME SOURCE		□ (A) or □ (B) GROSS MONTHLY OTHER INCOME	OTHER INCOME SOURCE			
				<u> </u>	T		
REFERENCE		PHONE	REFERENCE		PHONE		
ADDRESS		RELATIONSHIP	ADDRESS		RELATIONSHIP		
BANK REFERENCE			BANK REFERENCE				
		\Box CHECKING \Box SAVINGS			HECKING \Box SAVINGS		
* Alimony child support or separate maintenance incomes do not have to be revealed unless the applicant wishes to have such sources considered as a basis for repayment of the							

requested credit amount.

Signatures

You certify that the information given above is true and complete. We will rely, in part, on this information to evaluate your eligibility for credit. You authorize us to submit this application and any other documents pertaining to this proposed transaction to the following financial company(ies):

Westlake Financial Services 4751 Wilshire Blvd. Suite 100 Los Angeles CA 90010

You authorize these financial companies and their affiliates to obtain any information they want in order to verify information related to this credit application, including contacting a spouse to verify spouse related information.

Applicant's Signati	ure		Date	DL #	Jt. Applicant's	or Other Party's Signature (when a	applicable) Date	DL #	
For Dealer Use Only				VIN #:					
NEW/USED/DEMO	YEAR	MAKE		MODEL		BODY STYLE	MILEAGE	BOOK VALUE	
TRADE IN YEAR MA	AKE		MODEL		BODY STYLE	LIENHOLDER	ALLOWANCE	PAYOFF	
CASH SELLING PRIC	E NET TRADI	E	CASH DOWN		PRODUCTS & FEES	AMOUNT FINANCED	TERM	RATE	

Notices

Notice to applicants or other parties subject to the laws of *CALIFORNIA*: APPLICANT, IF MARRIED, MAY APPLY FOR A SEPARATE ACCOUNT. Notice to applicants or other parties subject to the laws of *NEW HAMPSHIRE*: IF THIS IS AN APPLICATION FOR A BALLOON RETAIL SALES CONTRACT, APPLICANTS ARE ENTITLED, UPON REQUEST, TO RECEIVE A WRITTEN ESTIMATE OF THE MONTHLY PAYMENT FOR A BALLOON PAYMENT REFINANCING IN ACCORDANCE WITH THE CREDITOR'S CURRENT REFINANCING PROGRAMS PRIOR TO ENTERING INTO A BALLOON CONTRACT.

Notice to applicants or other parties subject to the laws of *OHIO*: 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 to applicants or other parties subject to the laws of WISCONSIN: MARITAL PROPERTY AGREEMENT NOTICE: No provision of any marital property agreement, unilateral statement under Wisconsin Statutes Section 766.59 or court decree under Wisconsin Statutes Section 766.70 adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted, 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.

The following is for Wisconsin residents only:

Applicant is 🗌 married 🗌 unmarrie	ed (includes single, divorced or widowe	d) 🗌 separated.
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If married or separated, and Applicant's spouse is not a joint applicant, such spouse's name is ______ and address is

Waiver of Notice by Non-Joint Applicant Spouse: I agree to waive notice of any extension of credit in connection with this application.

Signature of Non-Joint Applicant Spouse Date

ALL APPLICANTS: IMPORTANT APPLICANT INFORMATION

You authorize us to obtain consumer credit reports from time to time as we want, for any legitimate purpose, in connection with the transaction that is proposed by this application or any future update, renewal, or extension of that transaction. Upon request, you will be informed whether or not a consumer report was ordered. If a report was requested, you will be informed of the name and address of the consumer credit reporting agency that furnished the report. We may keep this application whether or not it is approved. You authorize us to check your credit and employment history and to answer questions others may ask us about your credit record with us.

You agree that your telephone communications with us and any financial company that reviews this credit application may be monitored and/or recorded to assure the quality of service. You give your consent to receive calls and text messages from the creditor or its third party debt collector at any number you have given us, including calls and messages made using an autodialer or prerecorded message. You agree that we can send disclosures or other communications to you electronically at the e-mail address you have given us.

By signing below you acknowledge you have read the applicable notices on this page and agree to the terms of the ALL APPLICANTS: IMPORTANT APPLICANT INFORMATION section.

Applicant's Signature

Date

Jt. Applicant's Signature (when applicable)

Date