



RESIDENTIAL CREDIT APPLICATION

www.jjpowell.com

cs@jjpowell.com

Fax Number – 814-342-6483

Office Use Only
Credit Approved ()
Credit Denied ()

Credit Evaluation _____
Credit Limit _____

Today's Date ____/____/____

Home Phone _____

Full Name _____ Email Address _____

Social Security # _____ Age _____ Date of Birth ____/____/____

Address _____
_____ Zip _____ How long (yrs) _____

Own Home () Buying Home () Renting () Monthly Payment \$ _____

Landlord, mortgage or contract holder _____

Previous Address _____ Zip _____ How long (yrs) _____

Employer _____ Years Employed _____

Monthly Net Income \$ _____

CREDIT REFERENCES

1. Creditor _____ Balance \$ _____ Monthly Payment \$ _____

2. Creditor _____ Balance \$ _____ Monthly Payment \$ _____

3. Creditor _____ Balance \$ _____ Monthly Payment \$ _____

Name of nearest relative _____

Address _____ Zip _____ Phone _____

Co-Buyer's Name _____ SSN# _____

Address _____ Zip _____ Monthly Net Income \$ _____

Employer _____

Employer's Address _____ Zip _____ Phone _____

I/we authorize J.J. Powell, Inc. to make whatever credit inquires it deems necessary in condition with this credit application or in the course of review or collection of any credit extension in reliance on the application. I/we authorize and instruct any person of consumer reporting agency to compile and furnish to the bank any information it may have or obtain in response to such credit inquires and agree that same shall remain your property whether or not credit is extended. All information set forth in the application is declared to be true representation of fact made for the purpose of obtaining the credit requested and any willful misrepresentation could result in criminal action.

I/we agree to pay the balance of any credit extended in full within in 45 days of purchase or a finance charge will be applied to my/our account in the amount of 1.5% (18% APR). Customer also agrees to pay all costs of collection including but not limited to legal and attorney fees.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____