

MOTOR VEHICLE LOAN APPLICATION



TYPE OF CREDIT REQUESTED ■ **INDIVIDUAL** ■ **JOINT**

Area	Product	Type of Application	Application No. _____
<input type="checkbox"/> Metro <input type="checkbox"/> East <input type="checkbox"/> South <input type="checkbox"/> West	<input type="checkbox"/> Conventional <input type="checkbox"/> Oriental A+	<input type="checkbox"/> New Application <input type="checkbox"/> Transfer <input type="checkbox"/> Refinancing	Loan No. _____

APPLICANT INFORMATION

Name (First Name, Middle Initial, Last Name)		<input type="checkbox"/> Married <input type="checkbox"/> Not Married <input type="checkbox"/> Separated		Date of birth (month/day/year)
Social Security		Driver's License No.		Expiration Date
Street Address - Dev. / Neighborhood			Mailing Address	
No. / Street		How long at this address Years ____ Months ____		No. / Street
City		Zip Code		City
Home Phone		Cell Phone		<input type="checkbox"/> Own <input type="checkbox"/> Relatives <input type="checkbox"/> Rent <input type="checkbox"/> Other _____
Mortgage Balance (if own): \$	Monthly Payment \$	No. Dependents	Email	

EMPLOYMENT INFORMATION

Self-employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Business		Years ____ Months ____	Position
Street Address					
Phone No. and Ext.		Supervisor		Gross Monthly Salary:	Additional Income:
Source of Additional Income:				Phone No.	Total Gross Income:
Previous employment (if less than three years)					Phone No.
Years there	Position		Supervisor		

* YOU DO NOT HAVE TO DISCLOSE INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE, IF YOU DO NOT WANT US TO CONSIDER IT AS A BASIS FOR THE REPAYMENT OF THIS OBLIGATION.
 Verbal Agreement Written Agreement Judgment or Court Order Amount(s) (\$)

SPOUSE OR ADDITIONAL APPLICANT INFORMATION ■ **CO-APPLICANT** ■ **CO-SIGNER**

Name (Name, Middle Initial, Last Name)		<input type="checkbox"/> Married <input type="checkbox"/> Not Married <input type="checkbox"/> Separated		Date of Birth (month/day/year)
Social Security		Driver's License No.		Expiration Date
Street Address - Dev. / Neighborhood			Mailing Address	
No. /Street		How long at this address Years ____ Months ____		No. /Street
City		Zip Code		City
Home Phone		Cell Phone		<input type="checkbox"/> Own <input type="checkbox"/> Relatives <input type="checkbox"/> Rent <input type="checkbox"/> Other _____
Mortgage Balance (if own): \$	Monthly Payment \$	No. Dependents	Email	

EMPLOYMENT INFORMATION

Self-employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Business		Years ____ Months ____	Position
Street Address					
Phone No. and Ext.		Supervisor		Gross Monthly Salary:	Additional Income:
Source of Additional Income:				Phone No.	Total Gross Income:
Previous employment (if less than three years)					Phone No.
Years there	Position		Supervisor		

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 Verbal Agreement Written Agreement Judgment or Court Order Amount(s) (\$)

APPLICANT'S AUTHORIZATION

With my signature below I: (a) hereby certify that the information provided is true and complete; (b) I authorize Oriental Bank to check my credit and employment history; and (c) I authorize the disclosure of any and all credit and employment information to Oriental Bank. Notice to co-signer: You are being asked to guarantee this debt. Think carefully before you do. If the borrower does not pay the debt, you will have to. Make sure you can afford to pay if you have to and that you want to accept this responsibility. If the borrower does not pay the debt, you may have to pay it in full. You may also have to pay late fees or collection costs and other amounts under the Contract awarded in due course, which will increase the total amount that you will have to pay. Oriental Bank can collect this debt directly from you without first trying to collect from the borrower. Oriental Bank can use the same collection methods against you that can be used against the borrower, such as suing you, garnishing your wages, etc. If this debt is ever in default or in arrears, that fact may become a part of your credit record. This notice, in itself, is not a contract that makes you liable for the debt.

INSURANCE DISCLOSURE

THE BANK MAY NOT, AS A CONDITION TO GRANT YOU CREDIT, REQUIRE YOU TO PURCHASE AN INSURANCE OR ANNUITY PRODUCT FROM AN AFFILIATE OR REQUIRE YOU TO AGREE NOT TO PURCHASE AN INSURANCE OR ANNUITY PRODUCT FROM AN ENTITY NOT AFFILIATED WITH THE BANK. THE BANK WILL NOT REJECT AN INSURANCE POLICY YOU MAY SUBMIT PERTAINING THE CREDIT APPLICATION, PROVIDED SUCH INSURANCE MEETS THE BANK'S REQUIREMENTS AND STANDARDS FOR COVERAGE, FINANCIAL STRENGTH, AND SERVICES RENDERED BY THE INSURANCE COMPANY.

Applicant Signature	Date	Co-Signer Signature	Date
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FOR DEALER USE

Sale price: \$ _____	Dealer Name		Dealer No.	
Down payment: Rebate \$ _____	Seller's Name			Phone
Cash \$ _____	<input type="checkbox"/> New <input type="checkbox"/> Local	Year	Make, Model	
Trade In \$ _____	<input type="checkbox"/> Used <input type="checkbox"/> Imported			
Down payment total: \$ _____	Model Code		VIN/Serial No.	
Amount to be financed: \$ _____	Description of Trade in: Make, Model, Year			
Residual Value: \$ _____	<input type="checkbox"/> Non-Recourse <input type="checkbox"/> Recourse			
Term (Months): \$ _____	Type of Insurance: <input type="checkbox"/> Simple Interest <input type="checkbox"/> Double Interest <input type="checkbox"/> Annual		<input type="checkbox"/> Included in the Financing <input type="checkbox"/> Self Financed	