

- PLEASE PRINT, COMPLETE AND BRING INTO OR FAX YOUR CREDIT APPLICATION TO ANY DIXIE FURNITURE LOCATION -  
Charleston Fax 843.723.5920 • North Charleston Fax 843.554.4844 • Walterboro Fax 843.549.7605

\*\*\*\*\*NOTE: IF YOU ARE NOT MARRIED, PLEASE FILL OUT A SEPARATE APPLICATION, THANKS, CREDIT DEPARTMENT \*\*\*\*\*

## CONSUMER CREDIT APPLICATION

Check  
Appropriate  
box

- APPLICATION FOR INDIVIDUAL CREDIT IN YOUR OWN NAME RELYING ON YOUR OWN INCOME OR ASSETS AND NOT OF ANOTHER PERSON - COMPLETE SECTIONS A AND C  
 APPLICATION FOR JOINT CREDIT WITH ANOTHER PERSON - COMPLETE SECTIONS A, B AND C  
 APPLICATION FOR INDIVIDUAL CREDIT, BUT YOU ARE RELYING ON INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE OR ON THE INCOME OR ASSETS OF ANOTHER PERSON AS THE BASIS FOR REPAYMENT OF THE CREDIT REQUESTED - COMPLETE SECTIONS A, B AND C

### SECTION A - INFORMATION ABOUT APPLICANT

TITLE OPTIONAL \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

MR \_\_\_\_\_  
 MRS \_\_\_\_\_  
 MS \_\_\_\_\_  
 MISS \_\_\_\_\_

RES. PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_  
BUS. PHONE \_\_\_\_\_

FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ LAST \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOW LONG AT PRESENT ADDRESS \_\_\_\_\_ RENTS FROM   
BUYING FROM   
NAME AND ADDRESS OF LANDLORD OR MORTGAGE HOLDER \_\_\_\_\_

RENT PAYMENT \$ \_\_\_\_\_ MORTGAGE PAYMENT \$ \_\_\_\_\_

FIRST PREVIOUS ADDRESS \_\_\_\_\_ HOW LONG? \_\_\_\_\_  
SECOND PREVIOUS ADDRESS \_\_\_\_\_ HOW LONG? \_\_\_\_\_

NO. OF DEPENDENTS \_\_\_\_\_ NAME OF BANK \_\_\_\_\_

BANK ACCOUNT \_\_\_\_\_ Check \_\_\_\_\_  
Savings \_\_\_\_\_

Personal email address: \_\_\_\_\_

Personal email address (Joint Applicant): \_\_\_\_\_

### EMPLOYMENT RECORD

PRESENT EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_ EARNINGS \_\_\_\_\_  WK.  GROSS  
 WK.  GROSS

EMPLOYER ADDRESS \_\_\_\_\_

DEPARTMENT \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

FORMER EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_ EARNINGS \_\_\_\_\_  WK.  GROSS  
 MO.  NET

FORMER EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_ EARNINGS \_\_\_\_\_  WK.  GROSS  
 MO.  NET

OTHER INCOME \$ \_\_\_\_\_ SOURCE OF INCOME \_\_\_\_\_

NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_ RELATION \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

NEXT NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_ RELATION \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF CLOSE FRIEND \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF CLOSE FRIEND \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

**SECTION B - INFORMATION ABOUT JOINT APPLICATION OR OTHER PARTY**

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

RELATIONSHIP TO APPLICANT \_\_\_\_\_ RES PHONE \_\_\_\_\_ BUS. PHONE \_\_\_\_\_

PRESENT EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_ EARNINGS \_\_\_\_\_  WK.  GROSS  
 MO.  NET

EMPLOYER ADDRESS \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ DEPT NO. \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_ EARNINGS \_\_\_\_\_  WK.  GROSS  
 MO.  NET

OTHER INCOME \$ \_\_\_\_\_ SOURCE OF INCOME \_\_\_\_\_

ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED FOR REPAYING THIS OBLIGATION. ALIMONY, CHILD SUPPORT, SEPARATE MAINTENANCE RECEIVED UNDER:  COURT ORDER  WRITTEN AGREEMENT  ORAL UNDERSTANDING

NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_ RELATION \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

NEXT NEAREST RELATIVE NOT LIVING WITH YOU \_\_\_\_\_ RELATION \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF CLOSE FRIEND \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF CLOSE FRIEND \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ PHONE \_\_\_\_\_

AUTO OWNED	MAKE	MONTHLY PAYMENT	AUTO FINANCED BY	BALANCE
YEAR				\$
CREDIT REFERENCE	ADDRESS	MONTHLY PAYMENT	NAME ACCOUNT IS IN	OPEN
				CLOSED
CREDIT REFERENCE	ADDRESS	MONTHLY PAYMENT	NAME ACCOUNT IS IN	OPEN
				CLOSED
CREDIT REFERENCE	ADDRESS	MONTHLY PAYMENT	NAME ACCOUNT IS IN	OPEN
				CLOSED

The above information is for the purpose of obtaining credit and I/we certify that the information above is true and correct. I/we authorize you to verify the information and/or obtain additional information by obtaining data from a credit reporting agency. I/we hereby authorize Dixie Furniture Company to contact me/us at place of employment if Dixie Furniture Company finds it necessary during the term of this contract. I/we authorize Dixie Furniture Company to contact my/our Commanding Officer for the purpose of confirming my military status. I also authorize Dixie Furniture Company to contact my commanding officer in the event I default on my scheduled installment of the note signed by me on \_\_\_\_\_ and to advise him of said default. I hereby authorize Dixie Furniture Company to verify my address, length of lease, employment and any other information they need and the liberty to send me notices/promotions by email.

APPLICANT \_\_\_\_\_ CO-APPLICANT \_\_\_\_\_

ID OR DRIVERS LICENSE NO. \_\_\_\_\_ ID OR DRIVERS LICENSE NO. \_\_\_\_\_