



Facsimile Transmission Cover Sheet

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P.O. Box 80605 2133 King Ave. West
Billings, MT 59108-0605
(406) 656-1100 (800) 776-3675
Fax: (406) 652-0639 or (406)652-0698



CHECK ONE APPLICABLE BOX (PRIMARY APPLICANT AND JOINT APPLICANTS MUST COMPLETE SEPARATE FORMS):		PRODUCT TYPE:	
Primary Applicant: <input type="checkbox"/>	Joint Applicant: <input type="checkbox"/> Application is for joint credit with primary applicant or a guarantor. <input type="checkbox"/> Primary applicant is relying on me for income for alimony, child support, or separate maintenance or on my income or assets as the basis for repayment of the credit requested.	<input type="checkbox"/> RETAIL	<input type="checkbox"/> OTHER
		<input type="checkbox"/> LEASE	

"You" as used herein, refers to the Dealer, or any other Creditor to whom this application is submitted.

Last Name	First Name	Middle Name	Jr. Sr.
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Date of Birth	Soc. Sec. No.	Driver's License No. and State
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Physical Address (Number, Street, Apartment)	City	State	Zip Code
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Mailing Address (Number, Street, Apartment, P.O. Box)	City	State	Zip Code
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County	Phone in Applicant's Home? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	Phone Number Area Code ()	1 <input type="checkbox"/> Own Home Outright 2 <input type="checkbox"/> Buying Home	3 <input type="checkbox"/> Living with Relatives 4 <input type="checkbox"/> Leasing/Renting	5 <input type="checkbox"/> Own/Buying Mobile Home	Lived There Yrs. Mos.
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Cell Phone Number Area Code ()	Other Phone Number Area Code ()	Email Address - Personal	Email Address - Business
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Name and Address of Landlord or Mortgage Holder	Phone Number of Landlord or Mortgage Holder Area Code ()	Rent or Mtge. Pmt. \$
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Previous Address (Street, City, State and Zip Code) (If less than 2 years at present address)	Lived There Yrs.
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Level of Education	1 <input type="checkbox"/> 4-Year College Grad.	2 <input type="checkbox"/> 2-Year College Grad.	3 <input type="checkbox"/> Special Training	4 <input type="checkbox"/> Some College	High School Grad.?	5 <input type="checkbox"/> Yes	6 <input type="checkbox"/> No
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Current Employer Name	Current Employer Address
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Applicant's Occupation	Work Phone Number Area Code ()	Gross Monthly Salary \$	Time on Job Yrs. Mos.
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*Alimony, child support or separate maintenance income need not be revealed if I do not wish to have it considered as a basis for repaying this obligation.	*Source of other income	Other Income \$
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Previous Employer's Name (If less than 5 years at current employer)	City/State
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Name of Bank	1 <input type="checkbox"/> Checking & Savings 2 <input type="checkbox"/> Checking Only	3 Savings Only 4 No Account
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Have I Ever Had a Car or Other Merchandise Repossessed?	No Yes	If Yes, When?	Month	Year	Have I Ever Filed Bankruptcy?	No Yes	If Yes, When?	Month	Year
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Creditor's Name and City/State	Date Opened	Monthly Pmt. Amount	Unpaid Balance	Creditor's Name and City/State	Date Opened	Monthly Pmt. Amount	Unpaid Balance
(Current/Previous Cars Financed by or Leased through)				(Other Credit)			
(1)				(3)			
(2)				(4)			

Name and Address of Applicant's Nearest Relatives/Friends Not in Household (1)	Phone No. Area Code ()	Relationship
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(2)	Phone No. Area Code ()	Relationship
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(3)	Phone No. Area Code ()	Relationship
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(4)	Phone No. Area Code ()	Relationship
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For the purpose of securing credit from you, I certify that the above information is true and complete to the best of my knowledge. I further certify that I have attained the age of majority. I authorize you to check my credit and employment history, verify my income and provide and/or obtain information about credit experience with me. I agree that you, your affiliates, agents and service providers may monitor and record telephone calls regarding my account to assure the quality of your service or for other reasons. I also expressly consent and agree to you, your affiliates, agents and service providers using written, electronic or verbal means to contact me. This consent includes, but is not limited to, contact by manual calling methods, prerecorded or artificial voice messages, text messages, emails and/or automatic telephone dialing systems. I agree you, your affiliates, agents and service providers may do so using any e-mail address or any telephone number I provide, now or in the future, including a number for a cellular phone or other wireless device, regardless of whether I incur charges as a result.

I acknowledge I have read side A and side B of this form, including the state specific disclosures.

Applicant Signature: _____ **Date:** _____

I intend to apply for joint credit. _____ initial here

WISCONSIN RESIDENTS	NON-APPLICANT SPOUSE INFORMATION				Jr. Sr.
	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated				
	Last Name	First Name	Middle Name		
	Mailing Address	City	State	Zip Code	

MARITAL PROPERTY AGREEMENT NOTICE
 No provisions of any marital property agreement, unilateral statement under Section 766.59 Wisconsin Statutes or court decree under Section 766.70 Wisconsin Statutes adversely affects the interest of Creditor unless 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 Creditor is incurred.

STATEMENT OF MARITAL PURPOSE

I have applied for credit from _____ For the purpose of purchasing _____
 This Obligation (check only one) is (Dealer) _____ (Description of Vehicle)
 is not Being incurred in the interest of my marriage or family.

Signature: _____

STATE SPECIFIC DISCLOSURES

CALIFORNIA RESIDENT

Applicant, if married, may apply for a separate account.

MAINE RESIDENT

If your credit application is approved and you finance the purchase of your motor vehicle through Creditor, you will be required to insure the vehicle against loss or damage. Creditor requires collision coverage and comprehensive coverage or fire and theft coverage. In addition, if this application is for a lease, Creditor will also require you to obtain liability insurance.

You have the option to select an agent or broker of your choice, whether or not affiliated with Creditor. Obtaining insurance from a particular agent or broker does not affect credit decisions by Creditor, unless the insurance product selected violates the terms of your contract for the purchase or lease of the motor vehicle.

NEW HAMPSHIRE RESIDENT

I acknowledge receipt of a true and completely filled in copy of this credit application form at the time of signing. If you are applying for a balloon payment contract, you are entitled, if you ask, to receive a written estimate of the monthly payment amount for refinancing the balloon payment in accord with the creditor's existing refinance programs. You would be entitled to receive the estimate before you enter into the balloon payment contract. A balloon payment contract is an installment sale contract with a final scheduled payment that is at least twice the amount of one of the earlier scheduled equal periodic installment payments.

NEW YORK RESIDENT

A Consumer Report may be requested in connection with this application for credit or any future update, renewal, or extension of such credit. Upon request, you will be informed whether or not a consumer report was requested. If a report was requested, you will be informed of the name and address of the consumer agency that furnished the report.

OHIO RESIDENT

The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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.

RHODE ISLAND RESIDENT

A Credit Report may be requested in connection with this application for credit. Vehicle insurance may be obtained from a person of your choice.

TENNESSEE RESIDENT

You must maintain insurance as described in the contract. You may purchase this insurance from anyone you choose. Your choice of insurance provider will not affect the credit decision or credit terms in any way, except that Creditor may impose reasonable standards for the creditworthiness of the insurer or the scope of coverage chosen.

VERMONT RESIDENT

By signing this credit application, Applicant consents to You obtaining a credit report for the purposes of evaluating this application and to obtain subsequent credit reports, in connection with this transaction, for the purpose of reviewing the account, taking collection action on the account or for any other legitimate purpose associated with the account.