



# Personal Finance Company

**WE PROVIDE  
FINANCING  
FOR ANY  
OF YOUR  
FINANCIAL  
NEEDS!**

**SERVING YOUR  
CREDIT NEEDS IS  
THE REASON  
WE'RE IN BUSINESS**

- CONSOLIDATION LOANS
- HOME IMPROVEMENT LOANS
- APPLIANCE FINANCING
- AUTO LOANS & REPAIRS
- VACATION LOANS
- MEDICAL FINANCING
- FURNITURE FINANCING
- PERSONAL LOANS

*“Helping Today  
for your Tomorrow”*



**Personal  
Finance  
Company**

P.O. Box 189  
#3 S. Park Avenue, Suite B  
Herrin, IL 62948  
618/942-7314 • Fax: 618/942-4122  
Dee Wade, Mgr.

# APPLICATION FOR RETAIL CREDIT



**Personal  
Finance  
Company**

INITIAL THE TYPE OF CREDIT REQUESTED. NOTICE TO MARRIED APPLICANTS: YOU HAVE THE RIGHT TO APPLY FOR A SEPARATE ACCOUNT IN YOUR NAME

Individual Credit: \_\_\_ Complete sections A, C & D if only the applicant's income is considered for loan approval.  
 Complete sections A, B, C & D if 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.  
 Joint Credit: \_\_\_ Complete sections A, B, C & D if you intend to apply for joint credit making your co-applicant contractually liable for repayment of the loan.  
 Co-Signer: \_\_\_ Complete sections A, C & D if you will be contractually liable for repayment as a co-signer for another applicant.

**A. APPLICANT'S PERSONAL INFORMATION**  Check here if you are applying to become a Co-Signer

Name (First, Middle Initial, Last)		Date of Birth	Social Security No.	Home Phone	Cell Phone
Present Street Address			City	State	Zip Code
Date of Residence	Landlord or Mortgage Holder (Name/Phone)		Monthly Net Pay		
Present Employer (Name & City)		Date Employed	Employer Phone	Monthly Net Pay	

OTHER INCOME NOTICE: Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation: Source of other income \_\_\_\_\_ \$ \_\_\_\_\_

**B. CO-APPLICANT'S PERSONAL INFORMATION**

Name (First, Middle Initial, Last)		Date of Birth	Social Security No.	Home Phone	Cell Phone
Present Employer (Name & City)		Date Employed	Employer Phone	Monthly Net Pay	

**C. OTHER INFORMATION AND REFERENCES**

Are you obligated to make alimony or child support payments? (if so, how much \$ \_\_\_\_\_ per mo.) Yes or No

Do you pay childcare expenses? (if so, how much \$ \_\_\_\_\_ per mo.) Yes or No

Auto #1	Monthly Payment	Auto #2	Monthly Payment
Name of Personal Reference	Present Address (City and Zip)	Home Phone	Relationship
Name of Personal Reference	Present Address (City and Zip)	Home Phone	Relationship

Retail Dealer Name: \_\_\_\_\_ Balance to Finance: \_\_\_\_\_ Financing Terms: \_\_\_\_\_

**D. Loan Application Signatures**

All the information in this application is true. I understand that Section 1014 Title 18 U.S. Code makes it a federal crime to knowingly make a false statement on this application. You have my (our) permission to verify all information provided in this application. This includes, but is not limited to, contacting present and previous employers for employment verification. You may retain this application even if not approved. I understand that you may receive information from others about my credit and you may answer questions and request from others seeking credit or experience information about me or my accounts with you. PFC may report information about your account to credit bureaus. Late payments, missed payments or other defaults on your account may be reflected in your credit report. By providing your e-mail address and cell phone number above, you acknowledge and agree that (1) we can contact you via e-mail regarding all aspects of your loan and (2) we can contact you via texting regarding all aspects of your loan. I also agree and understand that regular texting charges may be charged by the cell phone service provider. I further authorize you to send me, from time to time and at your discretion, an opportunity to participate in other loan programs, including a loan by mail program by forwarding a negotiable check and related documents. If I choose not to receive this information, I will contact you to remove my name from your mailing list. I consent that upon denial, you may make appropriate Fair Credit Reporting Act disclosures to all applicants—if application is for two of us, this statement applies to both of us. Important information about procedures for opening a new account: to help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What does this mean to you? When you open an account, PFC will ask for your name, address, date of birth and other information that will allow us to identify you. PFC may also ask to see your driver's license or other identifying documents.

Signature of Applicant	Date	Signature of Co-Applicant/Co-Signer	Date
x		x	
Type of Verification: ____ Driver's License ID: # _____ ____ Other Government Issued Photo ID: # _____		Type of Verification: ____ Driver's License ID: # _____ ____ Other Government Issued Photo ID: # _____	
Identification verified by:		Identification verified by:	