AMERICAN FIRST FINANCIAL

602-230-0900

PERSONAL

Fax 602-532-7335

Loan Application

Date:		
Date:		

Last Name:	First: M:			
Add:		Ur	nit #	Parking Space#
City:	State:	Zip:		How Long:
County:	Nickname?		_Live With:	
SS#:	DOB:	E	Birth Place:	
DL#:	Exp Date:	State:	Maiden N	ame:
Mailing Add:			City:	Zip:
Home Phone:	Cell:		Cell 2:	
Work #	Ext:	Mess/Contact #:		
Email:			Marit	al Status:
Spouse/Partner Name:		DOB:	SS7	" :
Prior Res:			U	nit #:
City:	State:	Zip:	H	low Long:
Mothers Maiden:		Still Living: Y / N	Phone:	
Father's Name:		Still Living: Y / N	Phone:	
Have you been arrested in t	he last 5 years? Y / N What for:			
Do you have a criminal reco	ord? Y / N Explain:			
Have you ever filed or curre	ently in bankruptcy?			
Have you ever had an Auto	Title Loan before? With who?			
How did you hear about our	r Company? (Circle) Yellow Pages:	Verizon / Yellow Book	/ Qwest Dex / R	teferral / Drive By / TV / DMV
Radio / Sign / Repeat Custo	omer / Print Ad / Internet / BBB / Ot	her:	d	id you visit our web site? Y / N
Do you own or rent your ho	ome? Landlord or	Mortgage Co		
Phone #:	Contact Person:		Mortgag	ge Balance: \$
Attend college or school? Y	/ / N Where?			
Where do you Bank?	Accou	nt Types: Checking / Sa	avings / Credit C	ard?
Credit Card? Account #:		Ex	p. Date:	Balance? \$
Do you have any outstandir	ng loans? Y / N Explain:			
	s? Y / N with whom?			



Present Employer:			Supervi	sor:
Address:			Phone:	
City:	State:	Zip:	How Lo	ng:
Occupation:		Earnings	: \$	Per:
Work Schedule:			How many hours	s per week?
Are You Self-Employed? Y /	N Name:	Type Of	Business:	
Income: \$	Per:	Expenses: \$	Net: \$_	
Have a Professional License?	Y / N #	State Lic. #		City #:
Major Supplier:	Add:		Phon	e:
Major Customer:	Add:		Phone	e:
Previous Employer:			Super	visor:
Address:			Phone:	
City:	State:	Zip:	How Lo	ng:
SPOUSE INFORMAT	ION			
Spouse Name:		Pho	one:	
SS#:	DL#:	Exp	Date:	State:
DOB:	Birth Place:	M	aiden Name:	
Mothers Maiden:		Still Living: Y / N Pho	one:	
Father's Name:		Still Living: Y / N Pho	one:	
Present Employer:			Supervi	sor:
City:	State:	Zip:	How Lo	ng:
Occupation:		Earnings	: \$	Per:
Work Schedule:			_How many hours	s per week?
INSURANCE				
Insurance Co:		Phone:		Fax:
Agent:		Phone:		_Fax:
Address:		City:	State: _	Zip:
Policy#:			_Full Coverage?	Y / N Liability Only? Y / N
What is your collision deductib	ole? \$	_Comprehensive deductible?	\$	

VEHICLE INFORMATION

		VIN:			
Year:	Make:			Body:	
Color:	Plate #:	Tag Exp:		Mileage:	
Engine:	Tr	ransmission: Auto / N	Manual Additional Eq	iipment:	
List other veh	nicles you own:				
Year:	Make:	Mo	del:	Plate #:	
Year:	Make:	Mo	del:	Plate #:	
REFE	*WE MUST I	IAVE FIVE REFER	ENCES COMPLETE	WITH NAME, ADDRESS AND PHONE.	
Name:				Relationship:	
Address:				Phone:	
City:		State:	Zip:	How Long:	
Name:				Relationship:	
Address:				Phone:	
City:		State:	Zip:	How Long:	
Name:				Relationship:	
Address:				Phone:	
City:		State:	Zip:	How Long:	
Name:				Relationship:	
Address:				Phone:	
City:		State:	Zip:	How Long:	
Name:				Relationship:	
Address:				Phone:	
City:		State:	Zip:	How Long:	
UNDERSTAL FEDERAL L	ND THAT MISREPRESEN AW. I AUTHORIZE AME	TATION TO A FIN RICAN FIRST FINA	IANCIAL INSTITUT ANCIAL, LLC AND	NFORMATION IS TRUE AND CORRECT ION IS FRAUD AND VIOLATES STATE ANY AGENTS TO VERIFY ANY INFORM NESSESSARY FOR CREDIT EXTENSIO	AND MATION
Signature:				Date:	
Signature:				Date:	

American First Financial PRIVACY NOTICENOTICE OF ALL YOUR FINANCIAL PRIVACY RIGHTS:

We respect the privacy of our customers and we are committed to treating customer information responsibly. We collect 'non-public personal information' about you from the following sources; 1) Information we receive from you on applications or other forms, 2) Information about your transactions with us, and 3) Information contained within credit reports we receive.

We do not disclose any non-public personal information about our customers or former customers to anyone, except as permitted by law. We restrict access to nonpublic personal information about you to those employees who need to know that information to provide products and services to you. We maintain physical, electronic, and procedural safeguards that comply with federal standards to guard your non-public personal information.

ACKNOWLEDGEMENT: I/We acknowledge that I/we have read and understand and have received a copy of this notice on the date indicated below:

X		X	
Signature	Date	Signature	Date
Name (printed)		Name (printed)	

Required Items

[] must l	1) Bring the vehicle that is being used as security for the loan, we have to see the vehicle. Vehicle be in good condition.
[]	2) Extra set of keys (the key(s) must open the doors and start the ignition)
[] must (3) Bring in Arizona Certificate of Title for the vehicle that is paid off, with your registration. You owe no money on the vehicle.
[] insura	4) Bring Insurance Documents. If loan is for more than \$1,000. You must provide full coverage ince coverage on the vehicle.
	5) Proof of Income: Provide most recent pay stubs or income statements and bank statements. nust have a gross income of at least \$1,000.00 per month (or benefits income of at least \$800.00 onth for any loan)
[] pieces	6) Provide utility bills showing proof of where you are living. Or Lease Agreement Or 5 recent s of mail delivered to you at your address.
[]	7) Identification 2-Forms You must be 18 years of age or older
[]	8) 5 Personal References close family and friends (name address and phone number)
[] compa	9) If you rent or own, the name address and phone number of your Landlord or Mortgage any. If you are renting bring your lease agreement .

When you have the items call 602-230-0900 for an appointment to come in to process the loan. You can fax your application in. 602-532-7335.

Email: titleloansUSA@yahoo.com

www.aztitleloans.com