



CHOICE

Motor Credit

EQUITY LOAN APPLICATION

First Name: _____ Middle Initial: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Home Number: _____ Cell Number: _____ Office Number: _____
Date of Birth: _____ SSN: _____ Driver's License: _____
Other ID/Type: _____ Email Address: _____

Vehicle Year: _____ Manufacturer: _____ Model: _____
Mileage: _____ VIN: _____ Title State: _____
Title Number: _____ Name on Title: _____
Insurance Carrier: _____ Policy Number: _____ Exp Date: _____

Lienholder: None ___ Yes ___ Amount Owed: _____ Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____

Specifics about Vehicle (Optional): _____

Equity Loan Amount Requested: Minimum _____ Maximum _____

Requirements of Applicant:

- ▶ One form of valid Government Picture ID (Driver's License or Passport).
- ▶ Most recent Vehicle Title in original and unaltered form.
- ▶ Most recent Proof of Automobile Insurance for the Vehicle.
- ▶ Current Pictures of the Vehicle, including all 4 sides, engine compartment and interior.

By signing this loan application, I certify that the information above is correct to the best of my knowledge. Furthermore, I hereby authorize Choice Motor Credit, LLC (CMC) the right to make inquiries as it deems necessary to verify the accuracy of the information provided. I agree to indemnify and hold harmless CMC, its officers, directors, employees and/or agents from any and all claims, loss, or other liability arising from or related to the investigation of this information as provided herein.

Applicant Signature _____ **Date** _____