



# LOAN APPLICATION

Please complete this application form and bring it to the first available customer service representative at the front counter. Thank you!

What type of credit are you applying for?  Payday Loan  Payday Loan without Checking Account

## Applicant Information

Name: Last	First	Middle	Social Security Number	Date
Physical Address:	Apt. #	City	State	Zip
Mailing Address (if different from above):				
How long have you lived at your current address?	Cell Phone Number	<input type="checkbox"/> Contract <input type="checkbox"/> Monthly <input type="checkbox"/> Prepaid	Home Phone Number	
_____ / _____ Years Months				
Email Address			Birthdate	

## Employer Information / Source of Income\*

Employer Name / Source of Income		Position / Department (if applicable)		
Hire Date / Start Date	Work Phone, Extension	Payment Schedule	Dates or Day of Week Paid	
Gross Income Per Pay Period	How is source of income paid? <input type="checkbox"/> Direct deposit into account listed below <input type="checkbox"/> (Other) Deposit into a different account <input type="checkbox"/> (Other) Check	<input type="checkbox"/> Weekly <input type="checkbox"/> Every Two Weeks <input type="checkbox"/> Monthly <input type="checkbox"/> Twice Monthly	On: _____ On: _____	
Other Sources of Income	Start Date	Payment Schedule	Dates or Day of Week Paid	
Gross Income Per Pay Period	How is source of income paid? <input type="checkbox"/> Direct deposit into account listed below <input type="checkbox"/> (Other) Deposit into a different account <input type="checkbox"/> (Other) Check	<input type="checkbox"/> Weekly <input type="checkbox"/> Every Two Weeks <input type="checkbox"/> Monthly <input type="checkbox"/> Twice Monthly	On: _____ On: _____	

## Additional Employer / Source of Income\*

Employer Name / Source of Income		Position / Department (if applicable)		
Hire Date / Start Date	Work Phone, Extension	Payment Schedule	Dates or Day of Week Paid	
Gross Income Per Pay Period	How is source of income paid? <input type="checkbox"/> Direct deposit into account listed below <input type="checkbox"/> (Other) Deposit into a different account <input type="checkbox"/> (Other) Check	<input type="checkbox"/> Weekly <input type="checkbox"/> Every Two Weeks <input type="checkbox"/> Monthly <input type="checkbox"/> Twice Monthly	On: _____ On: _____	

## Checking Account Information

Bank Name	State Where Bank Account Was <b>Opened</b>	Account Number
How long has account been open?	Routing Transit Number	
_____ / _____ Years Months		

\*Alimony, child support or other sources of income need not be revealed if you do not wish to have such income considered as a basis for repaying any obligation.

At the time you repay this loan, you should have sufficient funds to meet your other financial obligations. If you cannot pay other bills because you are paying off this debt, you should enter the payment plan offered in connection with this loan.

**Please read before signing:** I certify to the best of my knowledge that all of the information stated above is true. I acknowledge that all of the information given above can be used to collect any loan given to me by Moneytree, Inc. I agree that photocopies and/or fax copies of the documents I sign are as valid and enforceable as the originals.

**Credit Reporting:** You agree that we may make inquiries concerning your credit history and standing, and we may report information concerning your performance under this Agreement to credit reporting agencies. Late payments, missed payments or other defaults on your account may be reflected in your credit report.

Applicant Signature

Date

**Office Use Only:**