

Type of Applicant: <input type="checkbox"/> Business <input type="checkbox"/> Individual <input type="checkbox"/> Joint Consumer		When completing Boxes A and C, please note that alimony, child support or separate maintenance income need not be revealed if you don't wish it considered as a repayment source for the loan.			Date: _____	
		Loan Purpose: <input type="checkbox"/> New Purchase; <input type="checkbox"/> Refinancing; <input type="checkbox"/> Lease Financing; or <input type="checkbox"/> Boat Refurbishment			How did you hear about us?	
A. APPLICANT INFORMATION						
Last Name		First Name	Middle Initial	Birth Date	Social Security No.	Home Phone
Address		How Long?	<input type="checkbox"/> Own <input type="checkbox"/> Rent	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No		
Previous Address		How Long?	<input type="checkbox"/> Own <input type="checkbox"/> Rent	Monthly Income \$		
Occupation		Business Phone	Business Fax	Hire Date	Nearest Relative Not Living With You	
Employer		Address: City	State	Zip	Relationship	Phone
B. FINANCIAL INFORMATION						
Bank Name		City		State	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	Acct. Balance \$
Any Property Repossessed? <input type="checkbox"/> No <input type="checkbox"/> Yes		Ever Filed Bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes Date _____	Ever Obtained Credit Under a Different Name <input type="checkbox"/> No <input type="checkbox"/> Yes	Any Lawsuits Pending Against You? <input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, List Name & Address	
C. INFORMATION REGARDING SPOUSE OR JOINT APPLICATION (If Applicable)						
Last Name		First Name	Middle Initial	Birth Date	Social Security No.	Relationship
Address		How Long?	<input type="checkbox"/> Own <input type="checkbox"/> Rent	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No		
Previous Address		How Long?	<input type="checkbox"/> Own <input type="checkbox"/> Rent	Monthly Income \$		
Occupation		Business Phone	Business Fax	Hire Date	Nearest Relative Not Living With You	
Employer		Address: City	State	Zip	Relationship	Phone
D. BUSINESS INFORMATION [Note: complete Box D if applying for business credit or if you are self-employed.]						
Type of Entity: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust <input type="checkbox"/> LLC Other _____				Name of Principals: Title:	% Interest:	
Name of Business				State and Date of Incorporation	_____ President	_____
Address				_____ Vice President	_____	_____ Secretary
Federal EIN				Primary Bank	City	State
				Bank Phone	Bank Contact	
E. BOAT INFORMATION						
Year	Make	Model	Engines <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple	Horsepower	Have you ever financed a boat? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Name of Finance Co. _____	
Where is the boat to be kept?		Length	Engine Make	Primary Use: Personal <input type="checkbox"/> Business <input type="checkbox"/>	Cash Sales Price: _____	
Registration of Boat will be in Name of:				Total Down Payment: _____		
Are you interested in an insurance quote from Gulfstream's insurance agency service?				Amount Requested: _____		
F. ACKNOWLEDGMENT: The undersigned certifies that the above information given for credit purposes is true and correct and authorizes Gulfstream and its assignees (and any credit bureau or investigative agency) to investigate the references, statements, or other data listed accompany this application. The undersigned authorizes all parties contacted to release credit and financial information requested as part of said investigation.						

APPLICANT'S SIGNATURE

JOINT APPLICANT'S SIGNATURE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income is derived from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law is Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580. If application for credit is denied, applicant may submit a written request for the reasons) for such denial within 60 days of the notification date. A written explanation shall be furnished within 30 days of Gulfstream's receipt of such request