

IMPORTANT NOTICE: To obtain a copy of the Credit Acceptance Corporation Privacy Policy, please call toll-free 877-288-6357



Application Type:  Individual  Joint for \_\_\_\_\_ Dealer \_\_\_\_\_ Lot # \_\_\_\_\_

**Customer Information and Physical Address** (Complete a separate application for applicant and joint applicant)

SSN \_\_\_\_\_ DOB \_\_\_\_\_ Optional: If you desire, please choose  Mr  Mrs  Ms Maiden Name \_\_\_\_\_  
 First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_  JR  SR  III  
 Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ Apt \_\_\_\_\_ Primary Driver  Yes  No  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \*\* \_\_\_\_\_  
 Primary Phone \_\_\_\_\_  Cell \*\*  Home  Other Secondary Phone \_\_\_\_\_  Cell \*\*  Home  Other Other Phone \_\_\_\_\_  
 Driver License # \_\_\_\_\_ Vehicle Insurer Name \_\_\_\_\_  
 Insurer Address \_\_\_\_\_ Agent \_\_\_\_\_  
 Insurer Phone \_\_\_\_\_ Policy# \_\_\_\_\_ Collision Coverage  Yes  No Deductible \$ \_\_\_\_\_ Max deductible = \$550  
 Make Credit Acceptance loss payee/lienholder

**Mailing Address (if different than current residence)**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Previous Address**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Residence Information**

Residence Owned by:  Self or Spouse  Landlord  Military  Self (w/Mortgage)  Relative  Other  
 Monthly Payment \$ \_\_\_\_\_ At Residence Since: \_\_\_\_\_ Name on Utility \_\_\_\_\_  
 Landlord or Mortgage Co. \_\_\_\_\_ Phone Number \_\_\_\_\_ Extension \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Bank Information**

Savings  Checking Bank Name \_\_\_\_\_ Location \_\_\_\_\_  Direct Deposit  
 Savings  Checking Bank Name \_\_\_\_\_ Location \_\_\_\_\_  Direct Deposit

**Primary Income Information (\*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)**

Income Type:  Employee (Gets W2)  Fixed Income\*  Unemployed  Self Employed (No W2)  Temp Service Employee  
 Gross Pay Monthly \$ \_\_\_\_\_ Start/Hire Date \_\_\_\_\_ Pay Frequency:  Monthly  Bi-Monthly  Bi-Weekly  Weekly  Annual  
 Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Phone Number \_\_\_\_\_ Extension \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Secondary Income Information (\*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)**

Income Type:  Employee (Gets W2)  Fixed Income\*  Unemployed  Self Employed (No W2)  Temp Service Employee  
 Gross Pay Monthly \$ \_\_\_\_\_ Start/Hire Date \_\_\_\_\_ Pay Frequency:  Monthly  Bi-Monthly  Bi-Weekly  Weekly  Annual  
 Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Phone Number \_\_\_\_\_ Extension \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**California Applicants:** If you are married, you may apply for a separate account.

**Ohio Applicants:** The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

**WISCONSIN RESIDENTS ONLY: Notice to married applicants:** No provision of any marital property agreement, a unilateral statement under Wis. Stat. § 766.59 or a court decree under Wis. Stat. § 766.70 adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the creditor is incurred. The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand that the creditor may be required by law to give notice of the credit transaction to my spouse.

I acknowledge that pursuant to the Fair Credit Reporting Act, my application will be submitted to Credit Acceptance Corporation, a Michigan corporation, and/or any of its affiliates or subsidiaries or divisions ("Credit Acceptance") for review with the assignment of a sales finance contract written, or to be written, in connection with my purchase.

I certify that the above information is complete and accurate. I understand and acknowledge that the Credit Acceptance will retain my Credit Application whether or not it is Approved.

**\*\*Email and Cellular Communication Consent:** By signing below I authorize and give consent to Credit Acceptance to use the email address and cellular telephone numbers I have provided on this application or which Credit Acceptance obtains to communicate with me for any purpose whatsoever, including but not limited to communication regarding my account activity, status and to collect any debt obligation I owe to Credit Acceptance. By providing a cellular telephone number on this application or to Credit Acceptance after my contract is assigned to them, I am consenting to receiving autodialed and artificial or prerecorded message calls from Credit Acceptance or its third party debtor collector at those numbers.

**Spousal Consent:** By signing below I authorize and give consent to Credit Acceptance to discuss my account with my spouse, if applicable, including discussing my account activity, status and payment arrangements.

Signature of Applicant / Joint Applicant \_\_\_\_\_ Date \_\_\_\_\_