

**ABOUT YOUR TRANSACTION** PURCHASE  **SELLER**  **DEALER/BROKER**  **BOAT**  **INDIVIDUAL**   **CORPORATE**  **PLEASURE**   **CHARTER**   
**REFINANCE**  **NAME** \_\_\_\_\_ **PRIVATE**  **OWNERSHIP**  **JOINT**   **OTHER** \_\_\_\_\_ **LIVEABOARD**   **OTHER** \_\_\_\_\_

**BOAT INFO** NEW  POWER  YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LENGTH \_\_\_\_\_ ENGINE MAKE \_\_\_\_\_ SINGLE  TWIN  GAS  HP  
 USED  SAIL  TRIPLE  DIESEL

**TRADE-IN INFO** POWER  YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LENGTH \_\_\_\_\_ ENGINE MAKE \_\_\_\_\_ SINGLE  TWIN  GAS  HP  
 SAIL  TRIPLE  DIESEL

**PREVIOUS BOATS OWNED:** \_\_\_\_\_ **INTENDED CLOSING DATE:** \_\_\_\_\_

PURCHASE PRICE \$ \_\_\_\_\_ SALES TAX + \$ \_\_\_\_\_ CASH DOWNPAYMENT - \$ \_\_\_\_\_ TRADE ALLOWANCE - \$ \_\_\_\_\_ OWED ON TRADE + \$ \_\_\_\_\_ LOAN REQUEST = \$ \_\_\_\_\_  
 REQUESTED TERM \_\_\_\_\_ YRS

**Applicant** FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_ LAST NAME \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_  
 SOCIAL SECURITY # \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ U.S. CITIZEN YES  NO   
 PHYSICAL ADDRESS \_\_\_\_\_ CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 OWN  MORTGAGE/RENT PMT. \_\_\_\_\_ YRS. AT RESIDENCE \_\_\_\_\_ HOME VALUE \$ \_\_\_\_\_  
 RENT  \$ \_\_\_\_\_ FULLTIMER   
 PREVIOUS ADDRESS (if less than 5 years at current address) \_\_\_\_\_ CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_  
 ACTIVE EMPLOYER \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS EMPLOYED \_\_\_\_\_ Ownership %  
 RETIRED  
 PREVIOUS EMPLOYER (if less than 5 years at current employer) \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS EMPLOYED \_\_\_\_\_  
 NEAREST RELATIVE'S NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 Are there any outstanding liens or judgements against you? Yes  No  Have you ever been bankrupt? Yes  No   
 Do you pay alimony/child support? Yes  No  If yes, please state annual amount \$ \_\_\_\_\_

**Co-Applicant** FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_ LAST NAME \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_  
 SOCIAL SECURITY # \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ U.S. CITIZEN YES  NO   
 PHYSICAL ADDRESS \_\_\_\_\_ CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 OWN  MORTGAGE/RENT PMT. \_\_\_\_\_ YRS. AT RESIDENCE \_\_\_\_\_ HOME VALUE \$ \_\_\_\_\_  
 RENT  \$ \_\_\_\_\_ FULLTIMER   
 PREVIOUS ADDRESS (if less than 5 years at current address) \_\_\_\_\_ CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_  
 ACTIVE EMPLOYER \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS EMPLOYED \_\_\_\_\_ Ownership %  
 RETIRED  
 PREVIOUS EMPLOYER (if less than 5 years at current employer) \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS EMPLOYED \_\_\_\_\_  
 NEAREST RELATIVE'S NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 Are there any outstanding liens or judgements against you? Yes  No  Have you ever been bankrupt? Yes  No   
 Do you pay alimony/child support? Yes  No  If yes, please state annual amount \$ \_\_\_\_\_

	INCOME	WAGES	INTEREST/DIVIDENDS	NET RENTAL	DISTRIBUTIONS	PENSIONS/SS INC	OTHER INCOME*	TOTAL INCOME
Applicant	MONTHLY <input type="checkbox"/> ANNUAL <input type="checkbox"/>							
Co-Applicant	MONTHLY <input type="checkbox"/> ANNUAL <input type="checkbox"/>							

\*Alimony, child support, or separate maintenance income need not be revealed if you do not wish it to be considered as a basis for repaying this obligation.

### Personal Financial Statement

		Lending Institution	Monthly Payment
<b>ASSETS</b>	CURRENT RV VALUE	\$	
	DEPOSIT ON RV BEING PURCHASED	\$	
	* CASH, INVESTMENTS & SECURITIES	\$	
	PRIMARY RESIDENCE (market value)	\$	
	SECOND RESIDENCE (market value)	\$	
	* RENTAL PROPERTIES (market value)	\$	
	* RETIREMENT ACCOUNT(S)	\$	
	PRIVATELY OWNED BUSINESS INTEREST	\$	
	* OTHER ASSETS, INCLUDING AUTOMOBILES	\$	
	<b>TOTAL ASSETS</b>	<b>\$</b>	
<b>LIABILITIES</b>	CURRENT RV LOAN BALANCE	\$	\$
	CREDIT CARDS	\$	\$
	NOTES PAYABLE	\$	\$
	PRIMARY MORTGAGE PAYABLE	\$	\$
	MORTGAGE ON SECOND RESIDENCE	\$	\$
	MORTGAGE(S) ON RENTAL PROPERTIES	\$	\$
	HOME EQUITY/SECOND MORTGAGE	\$	\$
	OTHER LIABILITIES	\$	\$
	LOANS ON AUTOMOBILES & EQUIPMENT	\$	\$
	<b>TOTAL LIABILITIES</b>	<b>\$*</b>	

\*If you require more room to submit your financial information, please attach a separate page. (To breakdown assets, rental properties, other assets, etc.)  
 I (we) represent, warrant and affirm that all of the statements made by me (us) in this application are true and correct and have been made by me in order to induce you to grant credit to me and with the knowledge that you will rely thereon, without limiting the foregoing. I (we) represent and warrant that no lawsuits or judgements are pending or entered against me (us). I authorize any creditor/broker to whom this application is forwarded to obtain any credit and employment history from any source and to answer questions about its credit experience with me (us). NOTICE: Consumer credit reports may be requested from one or more consumer reporting agencies (credit bureaus) in connection with this application. If I (we) request, I (we) will be informed whether any consumer credit report(s) were requested and, if so, of the name and address of the consumer reporting agency which furnished the report(s). IMPORTANT INFORMATION ABOUT OPENING YOUR NEW ACCOUNT. TO HELP FIGHT THE FUNDING OF TERRORISM AND MONEY LAUNDERING ACTIVITIES, FEDERAL LAW REQUIRES ALL FINANCIAL INSTITUTIONS TO OBTAIN, VERIFY AND RECORD INFORMATION THAT IDENTIFIES EACH PERSON WHO OPENS AN ACCOUNT.  
 MULTIPLE SIGNATURES INDICATES EACH APPLICANT'S INTENTION TO APPLY FOR JOINT CREDIT. "I" "ME" OR "MY" MEANS EACH APPLICANT WHO SIGNS BELOW. "YOU" OR "YOUR" MEANS VOYAGER MARINE CREDIT.

**APPLICANT'S SIGNATURE**  
 X \_\_\_\_\_ DATE \_\_\_\_\_  
**CO-APPLICANT'S SIGNATURE**  
 X \_\_\_\_\_ DATE \_\_\_\_\_

**ALSO REQUIRED:**  
 2 yrs. 1040 Tax Returns (all schedules)  
 2 Yrs. Business Tax Returns (if self-employed)

**Voyager Marine Credit**  
 P.O. Box 133  
 Spencerville, MD 20868  
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 www.voyagercredit.com