



P.O. Box 1704, Clemmons, NC 27012
 TELEPHONE: 800-438-8892 FACSIMILE: 800-438-8894
 www.sheffieldfinancial.com

I INTEND TO APPLY FOR JOINT CREDIT _____ (initials)
 JOINT APPLICATION WITH _____
 TYPE OF ACCOUNT REQUESTED: INSTALLMENT LOAN (Sections 1 and 3 apply)
 SHEFFIELD CARD (Sections 1, 2 and 3 apply)

DATE	SALES PERSON	DEALER NAME	TELEPHONE NUMBER () ()
PROMOTION	APPROVAL #	REQUESTED AMOUNT	# PAYMENTS () ()
			FAX NUMBER () ()

APPLICANT INFORMATION

FIRST NAME _____ LAST NAME _____ MIDDLE _____ JR/SR _____
 PRESENT STREET ADDRESS (NOT P.O. BOX) _____ APT. # _____ CITY _____ STATE _____ ZIP CODE _____
 HOME TELEPHONE _____ CELL PHONE _____ SOCIAL SECURITY # _____ BIRTH DATE _____
 OWN RENT FREE RENT UNKNOWN
 MAILING ADDRESS IF DIFFERENT FROM ABOVE _____ APT. # _____ CITY _____ STATE _____ ZIP CODE _____
 EMPLOYMENT INFORMATION • SELF EMPLOYMENT _____
 CURRENT EMPLOYER (IF SELF EMPLOYED, BUSINESS NAME) _____ BUSINESS TELEPHONE NUMBER _____
 EMPLOYER ADDRESS _____ HOW LONG? YRS. - MOS. _____ GROSS MONTHLY INCOME _____
 CITY _____ STATE _____ ZIP CODE _____ POSITION _____

CHECK IF LOAN TO BE IN BUSINESS NAME ABOVE. GUARANTY AGREEMENT REQUIRED.

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU _____ TELEPHONE NUMBER _____

CITY _____ STATE _____ ZIP CODE _____
 BANK INFORMATION _____

BANK NAME _____ STATE WHERE ACCOUNT OPENED _____

EQUIPMENT INFORMATION

1	MANUFACTURER/MAKE:	MODEL:	VIN/SERIAL#:	PRICE:
2				
3	ACCESSORIES AND OTHER CHARGES/FEE'S (LIST)			
NOTICE TO DEALER: THIS INFORMATION WILL BE USED TO PREPARE YOUR CUSTOMER'S CONTRACT. INCORRECT INFORMATION WILL DELAY FUNDING.				
TOTAL (LINES 1-3) \$ _____				
LESS CASH DOWNPAYMENT \$ _____				
LESS TRADE IN \$ _____				
REQUESTED AMOUNT \$ _____				

*If equipment being traded-in is financed through Sheffield, call us for pay-off and instructions.

IMPORTANT INFORMATION ABOUT ACCOUNT OPENING PROCEDURES: Federal law requires all financial institutions, prior to account opening, to obtain, verify, and record information that identifies each person who asks to open an account prior to account opening.
WHAT THIS MEANS TO YOU: When you apply for credit, we will ask your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. Failure to provide the required information may result in denial of your request to open an account.

DEALER USE ONLY

APPLICANT'S DRIVER'S LICENSE NUMBER _____ STATE _____ EXP DATE _____
 JOINT APPLICANT'S DRIVER'S LICENSE NUMBER _____ STATE _____ EXP DATE _____
 DEALER/EMPLOYEE NAME COMPLETING DRIVER LICENSE INFORMATION _____
 SIGNATURES MATCH PHOTO MATCH

SECTION 1 PLEASE PRINT CLEARLY