



CUSTOMER PROFILE/CREDIT APPLICATION

APPLICANT INFORMATION			
Name:			
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Own Rent (Please circle)	Monthly payment or rent:	How long?	
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Monthly payment or rent:	How long?	
EMPLOYMENT INFORMATION			
Current employer:			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
Previous employer:			
Address:			How long?
Phone:	E-mail:		Fax:
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
Name of a relative not residing with you:			
Address:			Phone:
City:	State:	ZIP Code:	
Relationship:			
CO-APPLICANT INFORMATION, IF FOR A JOINT ACCOUNT			
Name:			
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Own Rent (Please circle)	Monthly payment or rent:	How long?	
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Monthly payment or rent:	How long?	
EMPLOYMENT INFORMATION			
Current employer:			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	



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Previous employer:			
Address:			
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
APPLICATION INFORMATION CONTINUED			
Name of a relative not residing with you:			
Address:			Phone:
City:	State:	ZIP Code:	
Relationship:			
CREDIT CARDS			
Name	Account no.	Current balance	Monthly payment
MORTGAGE COMPANY			
Account no.:	Address:		
AUTO LOANS			
Auto loans	Account no.	Balance	Monthly payment
OTHER LOANS, DEBTS, OR OBLIGATIONS			
Description	Account no.	Amount	
OTHER ASSETS OR SOURCES OF INCOME			
Description	Amount per month or value		
I authorize GEORGIA JET, INC. to verify the information provided on this form as to my credit and employment history.			
Signature of applicant			Date
Signature of co-applicant, if for joint account			Date