



C. L. HANSON & ASSOCIATES, INC.
190 WESTBROOK ROAD, UNIT 3B
ESSEX, CT 06426

VOICE: 860-767-0828
 TOLL FREE: 888-426-7666
 FAX: 860-767-0838

DEALER: Name _____ Contact _____ Date ____/____/____ Time ____:____

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Applicant					Co-Applicant						
Social Security Number:					Social Security Number:						
First Name	Middle	Last Name	No. of Dependents		First Name	Middle	Last Name	No. of Dependents			
Address (Number & Street)			City	State	Zip	Address (Number & Street)			City	State	Zip
County		Home Phone		Date of Birth		County		Home Phone		Date of Birth	
Specify for Joint or Secured Credit Only: Married _____ Separated _____ Unmarried (Single, Divorced, Widowed) _____					Specify for Joint or Secured Credit Only: Married _____ Separated _____ Unmarried (Single, Divorced, Widowed) _____						
Buying	Rent	Own	Other(Please Specify)		Monthly Rent/Monthly \$	Buying	Rent	Own	Other(Please Specify)		Monthly Rent/Monthly \$
Mortgage Co. Name		Landlord Address			Mortgage Co. Name		Landlord Address				
Date Purchased		Purchase Price \$		Account No.		Date Purchased		Purchase Price \$		Account No.	
Mortgage Balance \$		Market Value \$		Time at Residence Yrs. Mos.		Mortgage Balance \$		Market Value \$		Time at Residence Yrs. Mos.	
Previous Residence (Street/City/State)				Time at Residence Yrs. Mos.		Previous Residence (Street/City/State)				Time at Residence Yrs. Mos.	
Mortgage Co. Name		Landlord Address			Mortgage Co. Name		Landlord Address				
Present Employer Name		Address			Present Employer Name		Address				
City		State		Phone Number		City		State		Phone Number	
Occupation		Length of Employment Yrs. Mos.		Occupation		Length of Employment Yrs. Mos.					
Gross Mo. Salary \$		Net Mo. Salary \$		Gross Mo. Salary \$		Net Mo. Salary \$					
Previous Employer		City/State		Phone Number		Previous Employer		City/State		Phone Number	
Occupation		Length of Employment Yrs. Mos.		Occupation		Length of Employment Yrs. Mos.					
Nearest Relative		Phone Address		Nearest Relative		Phone Address					
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.						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.					
Other Income: Source		Monthly Amount \$		Other Income: Source		Monthly Amount \$					
Has Applicant declared bankruptcy? Yes No					Has Applicant declared bankruptcy? Yes No						

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NEW Year _____ Make _____ Model _____	1. CASH SALE PRICE.....	\$ _____
Length _____ Engine Make _____ HP _____ # _____	2. CASH DOWN PAYMENT.....	\$ _____
Trailer Year _____ Make _____ Model _____	3. A. GROSS TRADE-IN.....	\$ _____
PLEASE FORWARD APPROPRIATE INVOICES	B. LESS AMOUNT OWED ON TRADE-IN \$	
TRADE Year _____ Make _____ Model _____	C. NET TRADE -IN.....	\$ _____
Length _____ Engine Make _____ HP _____ # _____	4. TOTAL DOWN PAYMENT	
Trailer Year _____ Make _____ Model _____	(ITEM 2 - ITEM 3C).....	\$ _____
I/WE authorize C.L. Hanson & Associates, Inc. or its assignees to make whatever credit inquires it deems necessary in conjunction with any credit requests made to C.L. Hanson & Associates, Inc. I/WE authorize and instruct any financial institution, any person or consumer reporting agency to compile and furnish the above or assignees with any information it may have or obtain in response to such credit inquires.	5. AMOUNT OF UNPAID CASE SALE PRICE	
APPLICANT _____ DATE ____/____/____	(ITEM 1 - ITEM 4).....	\$ _____
CO-APPLICANT _____ DATE ____/____/____	6. AMOUNT PAID TO OTHER ON BUYER'S BEHALF	
SPECIAL CONSIDERATIONS:	A. STATE SALES TAX.....	\$ _____
	B. CREDIT LIFE AND DISABILITY.....	\$ _____
	C. FILING FEE.....	\$ _____
	D. WARRANTY.....	\$ _____
	E. OTHER PERMISSIBLE FEES, IF ANY.....	\$ _____
	(TOTAL A + B + C + D + E).....	\$ _____
	7. AMOUNT FINANCED	
	(ITEM 5 + ITEM 6).....	\$ _____