

# Dennis Company

## CREDIT APPLICATION / PERSONAL

Please denote which store you will shop in most:

Aberdeen  Raymond  Long Beach  Elma  Montesano  Ilwaco Pre-Mix Concrete

### Main Office:

146 5<sup>th</sup> Street  
Raymond, WA 98577  
(360) 942-2427 Phone  
(360) 942-2932 Fax

Today's Date: \_\_\_\_\_

## APPLICATION INFORMATION

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ Birth date \_\_\_\_\_  
Spouse \_\_\_\_\_ Social Security Number \_\_\_\_\_ Birth date \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Years Residence \_\_\_\_\_  
Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Years Residence \_\_\_\_\_  
Home Telephone Number \_\_\_\_\_ Children \_\_\_\_\_  
Friend \_\_\_\_\_ Address \_\_\_\_\_ Phone Number \_\_\_\_\_

## EMPLOYMENT INFORMATION

Employer \_\_\_\_\_ Work Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
Position \_\_\_\_\_ Monthly Take Home Pay \$ \_\_\_\_\_ Years Employed \_\_\_\_\_  
Spouse Employer \_\_\_\_\_ Work Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
Position \_\_\_\_\_ Monthly Take Home Pay \$ \_\_\_\_\_ Years Employed \_\_\_\_\_

## LIABILITIES

Mort. Holder / Landlord \_\_\_\_\_ Own \_\_\_\_\_ Rent \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Auto \_\_\_\_\_ Make \_\_\_\_\_ Year \_\_\_\_\_ Making Pmts to? \_\_\_\_\_ Bal. Owing \_\_\_\_\_ Monthly Pmt \_\_\_\_\_  
Bank Card \_\_\_\_\_ Exp. Date \_\_\_\_\_ Bal. Owing \_\_\_\_\_ Monthly Pmt \_\_\_\_\_  
Bank Card \_\_\_\_\_ Exp. Date \_\_\_\_\_ Bal. Owing \_\_\_\_\_ Monthly Pmt \_\_\_\_\_  
Bank Card \_\_\_\_\_ Exp. Date \_\_\_\_\_ Bal. Owing \_\_\_\_\_ Monthly Pmt \_\_\_\_\_  
Local Reference \_\_\_\_\_ Bal. Owing \_\_\_\_\_ Monthly Pmt \_\_\_\_\_  
Local Reference \_\_\_\_\_ Bal. Owing \_\_\_\_\_ Monthly Pmt \_\_\_\_\_  
Misc. \_\_\_\_\_ Bal. Owing \_\_\_\_\_ Monthly Pmt \_\_\_\_\_

## OTHER

Have you ever filed for bankruptcy? \_\_\_\_\_ When? \_\_\_\_\_ Reason? \_\_\_\_\_  
Have you submitted a credit application with us previously? \_\_\_\_\_ When? \_\_\_\_\_  
Nearest Relative \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone No. \_\_\_\_\_  
Bank (Branch) \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_  
Bank Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of Account Requested:  Open/Revolving Account  Major Purchases

I give you permission to investigate my credit record and to check any statement I've made. I authorize any person or consumer-reporting agency to complete and furnish to you any information it may have or obtain in response to your credit or employment inquiries. I understand that should you employ an attorney for collection on this account I will pay all costs and fees, including attorney fees. I also agree to pay any finance or late charge, which may occur.

Applicant Signature \_\_\_\_\_ Date Signed \_\_\_\_\_