



RV CREDIT APPLICATION

Destinations RV, Inc.
 6131 Green Valley Rd.
 Neenah, WI 54956
 Phone: (920) 426 - 1700
 Fax: (920) 426 - 1707

APPLICANT

Name _____

Present Street Address _____

City, State, Zip Code _____

Years at Address _____ Home Phone Number _____ Date of Birth _____

Social Security Number _____ Drivers License Number _____

Previous Address _____ Years at Previous Address _____

Nearest Relative (Not living in household) _____ Relationship _____

CO-APPLICANT

Name _____

Present Street Address _____

City, State, Zip Code _____

Years at Address _____ Home Phone Number _____ Date of Birth _____

Social Security Number _____ Drivers License Number _____

Previous Address _____ Years at Previous Address _____

Nearest Relative (Not living in household) _____ Relationship _____

EMPLOYMENT

Present Employer Name & Address _____ Phone Number _____

Occupation _____ Supervisor _____

Years of Service _____ Salary Per Month _____
 \$ _____ Net Gross

Previous Employment _____ Years of Service _____

Present Employer Name & Address _____ Phone Number _____

Occupation _____ Supervisor _____

Years of Service _____ Salary Per Month _____
 \$ _____ Net Gross

Previous Employment _____ Years of Service _____

Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a source of repaying this obligation.

Other Income (Amount) \$ _____ Source _____

HOUSING

Own Land Contract Rent Other Live with Parent/Relative

Name and Address _____ Monthly Payment \$ _____

Year _____ Make _____ Model _____ Length _____

Camper Trailer Fifth Wheel Motor Home

Equipment: Diesel A/C Auto Jacks Cabinet Up Awning Generator Satellite

Additional: _____

MSRP _____ Invoice _____ Mileage _____

OTHER INFORMATION:

ACKNOWLEDGEMENT

Everything I have stated in this application is true to the best of my knowledge, and is an accurate statement of my obligations and the income upon which I will rely on to pay the credit requested. I understand that you will rely on this information in deciding whether or not to grant or continue credit to me. I also understand that you will retain this information whether or not my application is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.

Signature of Applicant _____ Date _____

Signature of Applicant _____ Date _____

| | |
|-------------------------|----------------------|
| Description of Trade-in | Selling Price \$ |
| Balance Owed to: | Cash Down \$ |
| Trade-in Allowance \$ | Trade Equity \$ |
| Amount Owning \$ | Amount to Finance \$ |
| Trade Equity | Term Requested |

If this application is for joint credit, complete all sections for the applicant and the co-applicant and acknowledge below
 We intended to apply for joint credit.

Applicant Signature _____ Co-Applicant Signature _____