



AMERICAN CREDIT CORPORATION

88 Currant Road / Fall River MA 02720-4781

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LOAN APPLICATION

Loan Amount \$ _____ Terms (Circle One) 24 36 48 60 72 84 months

BORROWER

Individual Name or Corporation Name _____ Telephone () _____

Legal Laundry Name (D/B/A) _____ Fax () _____

Laundry Address _____ E-Mail _____

Business Entity Corporation Partnership Proprietorship LLC Cell Phone () _____

LAUNDROMAT INFORMATION (Check Where Applicable)

New Store Existing Store (Since _____) Square Footage of Laundromat _____

Unattended Store Attended Part-Time (Hours _____) Attended Full-Time

LEASE INFORMATION

Term of Lease From _____ To _____ Renewal Options _____ Rent Per Month _____

Landlord's Name _____ Telephone () _____

or Mortgage Holder _____ Telephone () _____ Mortgage Payment _____

Parking (Street parking, shopping center parking lot, number of entrances, etc.) _____

Population (In trading area, apartments; single family dwellings; medium, low or high income; etc.) _____

Competition (Number of laundromats within 1/2 mile radius, your opinion in relation to competition, etc.) _____

APPLICANT

Name	Date of Birth / /	Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced, widowed)
Present Address	Number of Years _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent Amt\$ _____	Social Security Number
Former Address If less than 2 years at present address	Years at Former Address _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent	Home Phone ()
Name and Address of Employer		Business Phone ()
Years on this job _____ Years employed in this line of work or profession _____	<input type="checkbox"/> Self Employed	Position/Annual Salary

SPOUSE (REQUIRED IF MARRIED)

Name	Date of Birth / /	Social Security Number
Name and Address of Employer		Business Phone ()
Years on this job _____ Years employed in this line of work or profession _____	<input type="checkbox"/> Self Employed	Position/Annual Salary

CLOSEST RELATIVE NOT LIVING WITH YOU

Name _____ Telephone () _____
Address _____

	Applicant		Spouse	
Have you had any outstanding judgments or tax liens?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
In the last 7 years have you been declared bankrupt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you had property foreclosed or given title in lieu thereof?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

The undersigned certifies that all the information provided in this financing application is true and correct and authorizes American Credit Corporation to investigate the references, statements, or other data listed or accompanying this application. The undersigned authorizes all parties contacted to release credit and financial information requested as a part of said investigation. Each of the undersigned authorizes American Credit Corporation to answer questions about its credit experience with the undersigned.

Date

Signature

Date

Signature

PLEASE SEND THIS COMPLETED APPLICATION WITH THE FOLLOWING:

1. Copy of applicant(s) driver's license.
2. Past 3 month's bank statements
3. Last year's complete personal and corporate tax returns.
4. Signed sales agreement on equipment.
5. A copy of the lease agreement or deed on the laundry location.
6. A \$150.00 application fee. These funds will not be refunded if the applicant cancels for any reason.
7. Attach financial statements of business(es) owned.

IT IS SIMPLE -- GIVE US THE REQUIRED INFORMATION AND WE WILL GIVE YOU A QUICK DECISION.

(O V E R)

AMERICAN CREDIT CORPORATION PERSONAL FINANCIAL STATEMENT

ASSETS **DESCRIPTION** **CASH OR MARKET VALUE**

CASH, CHECKING AND SAVINGS ACCOUNTS

Name of Financial Institution	Owner	(J)	If Pledged, to Whom?	Balance

Notes Receivables (Show Name, Address of Debtor) and/or Life Insurance

_____ \$ _____
 _____ \$ _____

Securities Readily Marketable – Attach Statement(s) \$ _____

Securities Not Readily Marketable – Attach Statement(s) \$ _____

SCHEDULE OF REAL ESTATE OWNED (If Additional Properties Owned Attach Separate Schedule)

Address of Property	Date of Purchase	Purchase Price	Type of Property	Mortgage Payments	Amt. of Mortgages & Lien	Gross Rental Income	Present Market Value

Automobiles (Show Make and Year)

_____ \$ _____
 _____ \$ _____

Net Worth of Business(es) Owned (If More Than One, Attach List) \$ _____

Other Assets (Please Itemize)

_____ \$ _____
 _____ \$ _____

TOTAL ASSETS \$ _____

LIABILITIES

Creditors' Name And Address	Account Number	Monthly Payment	Number of Months Left to Pay	Unpaid Balance
Real Estate Loans (Include Mortgages)				
1) Name _____ City/State _____				
2) Name _____ City/State _____				
3) Name _____ City/State _____				
Automobile Loans				
1) Name _____ City/State _____				
2) Name _____ City/State _____				
3) Name _____ City/State _____				
Other Debts (Include Credit Cards)				
1) Name _____ City/State _____				
2) Name _____ City/State _____				
3) Name _____ City/State _____				
4) Name _____ City/State _____				
5) Name _____ City/State _____				
6) Name _____ City/State _____				

TOTAL LIABILITIES \$ _____

NET WORTH (Total Assets Minus Total Liabilities) \$ _____