

# Smulekoff's Credit Application and ACH Authorization Form

## Applicant

### Please Tell Us About Yourself

Last Name	First Name	Middle Initial
Date of Birth	Soc. Sec. #	
Home Phone	# Children	Email address
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried		
Nearest Relative not living with you		Phone
Another Relative not living with you		Phone

### Where You Live

Home Address	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	<input type="checkbox"/> Other	Apt No.
City	State	Zip	Since	
Mail Address (If Different)	City	State	Zip	
Home:	Purchase Price	Home Value	Interest Rate	
Previous Address (If at present address less than three years)				
Monthly Mortgage or Rent Payment	Annual Taxes and Insurance <input type="checkbox"/> Included or \$			

### Where You Work

Employer's Name	Started Mo./Yr.
City, State	Occupation Phone
Previous Employer (if at job less than 3 years)	How Long?
City, State	Phone

### About Your Income

Gross Monthly Salary	Net Salary	Other Income*
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Bank (Check all that apply):  Checking Acct  Savings Acct  
Your Bank's Name \_\_\_\_\_

Co-Applicant  Spouse  Co-Signer

### Please Tell Us About Yourself

Last Name	First Name	Middle Initial
Other Names	Date of Birth	Soc. Sec. #
Cell Phone	# Children	Email Address
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried		
Nearest Relative not living with you		Phone
Another Relative not living with you		Phone

### Where You Live

Home Address	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	<input type="checkbox"/> Other	Apt No.
City	State	Zip	Since	
Mail Address (If Different)	City	State	Zip	
Home:	Purchase Price	Home Value		
Previous Address (If at present address less than three years)				
Monthly Mortgage or Rent Payment	Annual Taxes and Insurance <input type="checkbox"/> Included or \$			

### Where You Work

Employer's Name	Started Mo./Yr.
City, State	Occupation Phone
Previous Employer (if at job less than 3 years)	How Long?
City, State	Phone

### About Your Income

Gross Monthly Salary	Net Salary	Other Income*
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Bank (Check all that apply):  Checking Acct  Savings Acct  
Your Bank's name \_\_\_\_\_

Please read before signing application:

The above information is for the purpose of obtaining credit and is warranted to be true. I agree to pay all bills upon receipt of statement or as otherwise expressly agreed. I hereby authorize the Smulekoff Furniture Company and/or its assignee, any credit bureau or other investigative agency employed by such person, to investigate the references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility. The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract), because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington., DC 20580.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*You need not disclose alimony, child support, or separate maintenance income if you do not wish to have it considered as basis for repaying this obligation.

#### FOR CREDIT DEPT USE ONLY:

HUCL- \_\_\_\_\_ Derog- Y/N Job Time- \_\_\_\_\_ Home/Mobile Homer Owner -or- Renter  
Gross Income-\$ \_\_\_\_\_/MO Debt Ratio- \_\_\_\_\_% Verified with Cr Report & Checked Photo ID [  ]  
Grade-- \_\_\_\_\_ OK\$ \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_

# Smulekoff's Furniture Co., Inc.

## Authorization for Direct Payment Automatic Bill Payment

I (we) authorize Smulekoff's to initiate variable entries to my (our) account described below:

Checking Account No. \_\_\_\_\_ Savings Account No. \_\_\_\_\_

Bank routing number of customer's account: \_\_\_\_\_

Financial Institution's Name \_\_\_\_\_

Financial Institution's Address \_\_\_\_\_

Smulekoff's will send a file to the Federal Reserve on Wednesday of each week for payment(s) that are due that week. The amount of your payment(s) will be deducted from your account on Friday of that week. If your payment(s) is/are not due until Thursday or Friday of that week, then your payment(s) will not be deducted from your account until Friday of the following week. This authorization is to remain in full force and effect until Smulekoff's has received written notification from me (or either one of us) of its termination in such time and manner as to afford Smulekoff's a reasonable opportunity to act on it.

Signature \_\_\_\_\_

(Optional for Joint Account)

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Telephone No. \_\_\_\_\_

E-Mail Address \_\_\_\_\_

(If the customer does not have an email that is fine, we will just mail out their confirmation through the mail)

**Attach a Voided Checking or Savings Deposit Slip Here**

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The following is to be completed by Smulekoff's Finance Department

Customer's payment(s) due date: \_\_\_\_\_

Customer's account number: \_\_\_\_\_

Customer's contract number(s): \_\_\_\_\_

Payment Types:

1) Single Payment(s):

A) Amount of payment(s): \_\_\_\_\_

2) Recurring payment(s):

A) Amount of payment(s): \_\_\_\_\_

B) Last payment(s) due date: \_\_\_\_\_

**Note:** If there is more than one contract per account include each of the contract numbers in the payment due date and contract number line and then amount of payment for each contract in 1) A and/or 2) A & B above.