

Bergen Sales Credit Application

Please fax this completed form to:

Bergen Sales at (585) 494-1605

Primary Applicant

Full Name: _____ Home Phone: _____
Date of Birth: _____ Social Security Number: _____ Number of Dependents: _____
Current Address: _____ City: _____ State: _____ Zip Code: _____
How long have you lived at this address? _____
If you own how much do you pay per month? _____ If you rent how much do you pay per month? _____
Mortgage or Landlord's Name: _____ Landlord's Phone: _____
Landlord's Address: _____

Previous Address (If current is less than 1 year)
Address: _____ City: _____ State: _____ Zip Code: _____
How long did you live at this address? _____

Employment

Name of Employer: _____ Phone Number: _____
Your Position: _____ How long have you worked there? _____
Gross salary per month (Before taxes are taken out): _____
Name of Previous Employer: _____
How long did you work for your previous employer? _____

Other Income

List any other sources of income and the "per year" or "per month" or "per week" amount.

Source 1: _____ Amount: _____
Source 2: _____ Amount: _____

Note: 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.

Co-Applicant

Full Name: _____ Home Phone: _____
Date of Birth: _____ Social Security Number: _____ Number of Dependents: _____
Current Address: _____ City: _____ State: _____ Zip Code: _____
How long have you lived at this address? _____
If you own how much do you pay per month? _____ If you rent how much do you pay per month? _____
Mortgage or Landlord's Name: _____ Landlord's Phone: _____
Landlord's Address: _____

Previous Address (If current is less than 1 year)
Address: _____ City: _____ State: _____ Zip Code: _____
How long did you live at this address? _____

Employment

Name of Employer: _____ Phone Number: _____
Your Position: _____ How long have you worked there? _____
Gross salary per month (Before taxes are taken out): _____
Name of Previous Employer: _____
How long did you work for your previous employer? _____

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Co-Applicant (Continued)

Other Income

List any other sources of income and the "per year" or "per month" or "per week" amount.

Source 1: _____ Amount: _____

Source 2: _____ Amount: _____

Note: 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.

Credit Inquiries

I/WE AUTHORIZE the Lender to make whatever credit inquiries it deems necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on the application. I/We authorize and instruct any person or consumer reporting agency to compile and furnish to the Lender any information it may have or obtain in response to such credit inquiries and agree that same shall remain your property whether or not credit is extended.

I am/We are hereby notified that a consumer credit report may be requested in connection with this credit application. If I/We request, I/We will be informed whether or not a consumer report was requested, and if such report was requested, I/We will be informed of the name and address of the consumer reporting agency that furnished the report. All Information set forth in this application is declared to be true of facts for the purpose of obtaining the credit requested and any willful misrepresentation of this application could result in criminal action.

Applicant Signature: _____

My signature indicates that I have read and agree to the statement above.

Co-Applicant Signature: _____

My signature indicates that I have read and agree to the statement above.

Date: _____