



Camper Clinic II  
 15855 S. IH-35  
 Buda, Texas 78610

**FAX TO: (512) 295-7878**  
**Attn: Steve Roberson**  
 Telephone: (512) 312-1478

**(A) Applicant**

FULL NAME: Last, First, Middle		
Birth Date	Social Security #	Dependents Including Self
Marital Status M = Married S = Single U = Unmarried		
Present Street Address		
City, State, Zip Code		
How Long At Present Address Years: Months:		Home Phone #
Residential Status H = Home Owner R = Renter P = Parents O = Other	Mo Rent or Pmt \$	
Landlord Or Mortgage Holder's Name		Phone #
Balance Of Mortgage Value \$		Account #
Previous Address		
Closest Living Relative		
Any Bankruptcy? Y or N When?		U.S. Citizen ___Yes___No

**(B) Co-Applicant**

FULL NAME: Last, First, Middle		
Birth Date	Social Security #	Dependents Including Self
Marital Status M = Married S = Single U = Unmarried		
Present Street Address		
City, State, Zip Code		
How Long At Present Address Years: Months:		Home Phone #
Residential Status H = Home Owner R = Renter P = Parents O = Other	Mo Rent or Pmt \$	
Landlord Or Mortgage Holder's Name		Phone #
Balance Of Mortgage Value \$		Account #
Previous Address		
Closest Living Relative		
Any Bankruptcy? Y or N When?		U.S. Citizen ___Yes___No

**Applicant's Employment**

Employer's Name		Employer's City, State
Employer's Business		Supervisor
Job Title Or Occupation	Self Employed ___Yes___No	Hire Date
Salary (Gross) PER H=Hr W=Week M=Mth Y=Yr \$	Full or Part Time	Work Phone #
Previous Employer		Employed From To
Previous Employer's City, State		Phone #
(A) Source Of Other Income*		Monthly Amount \$

**Co-Applicant's Employment**

Employer's Name		Employer's City, State
Employer's Business		Supervisor
Job Title Or Occupation	Self Employed ___Yes___No	Hire Date
Salary (Gross) PER H=Hr W=Week M=Mth Y=Yr \$	Full or Part Time	Work Phone #
Previous Employer		Employed From To
Previous Employer's City, State		Phone #
(B) Source Of Other Income*		Monthly Amount \$

\*Alimony, child support, or separate maintaince income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

**AKNOWLEDGEMENT**

By signing this application you promise that all information is true and complete. You also promise that you have revealed any pending lawsuits or unpaid against you. You intend the seller and/or assignee to rely upon these promises in deciding whether to extend credit to you. You authorize a full investigation of your judgements credit record and your employment history. You also authorize the seller and / or assignee to release information about your credit experience with them.

Signature (Applicant)	Date	Signature ( Co-Applicant)	Date
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