

discount wheels

BUYER INFORMATION

Name: _____ SS: _____ Date of Birth: _____

Place of Birth: _____ How Long in Brevard: _____ YRS _____ MO

Address: _____

How Long at current address: _____ YRS _____ MO/ Do you rent or own: _____

Phone (circle preferred): Home _____ Cell _____

Work _____ Fax _____ Other (pager, Nextel, etc) _____

Email Address: _____ Texting Address: _____

Previous Address: _____

How Long at previous address: _____ YRS _____ MO

Name of nearest relative(s): _____

Address of nearest relative(s): _____ Phone: _____

EMPLOYMENT INFORMATION

Company Name: _____ Occupation: _____

Company Address: _____ Supervisor: _____ Phone _____

How long at this job: _____ YRS _____ MO

Previous Employment: _____ How long at job: _____ YRS _____ MO

Source of other Income: _____

PERSONAL REFERENCES

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

I authorize Discount Wheels to check the validity of this application including a formal credit report at any time.

Signature _____ Date _____ Witness _____