



INFINITI
FINANCIAL
SERVICES

Credit Application

SignatureFINANCING®

DEALER INFORMATION **PLEASE USE BLACK INK**

DEALER NAME _____	DEALER NUMBER _____	PROGRAM TYPE: _____
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APPLICANT INFORMATION (MARRIED MAY APPLY AS AN INDIVIDUAL)

<i>APPLICANT (PRINCIPAL DRIVER OF VEHICLE)</i>					<i>JOINT APPLICANT RELATIONSHIP</i>				
FULL NAME	FIRST	MI	LAST	<input type="checkbox"/> SR <input type="checkbox"/> JR	FULL NAME	FIRST	MI	LAST	<input type="checkbox"/> SR <input type="checkbox"/> JR
STREET ADDRESS			APT #	HOW LONG? YRS. MOS.	STREET ADDRESS			APT #	HOW LONG? YRS. MOS.
CITY	STATE	ZIP	HOME PHONE ()		CITY	STATE	ZIP	HOME PHONE ()	
DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER			DATE OF BIRTH	AGE	SOCIAL SECURITY NUMBER		
<input type="checkbox"/> OWN/BUYING			<input type="checkbox"/> LIVE WITH RELATIVE		MONTHLY PAYMENT			<input type="checkbox"/> OWN/BUYING	
<input type="checkbox"/> RENT/LEASE			<input type="checkbox"/> OTHER _____		\$			<input type="checkbox"/> RENT/LEASE	
<input type="checkbox"/> RENT/LEASE			<input type="checkbox"/> OTHER _____		\$			<input type="checkbox"/> RENT/LEASE	

EMPLOYMENT									
EMPLOYER NAME			HOW LONG? YRS. MOS.		EMPLOYER NAME			HOW LONG? YRS. MOS.	
EMPLOYER ADDRESS									
POSITION/TITLE		WORK PHONE ()	GROSS ANNUAL SALARY		POSITION/TITLE		WORK PHONE ()	GROSS ANNUAL SALARY	
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 DEBT.			ANNUAL AMOUNT		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 DEBT.			ANNUAL AMOUNT	
OTHER INCOME SOURCE			\$		OTHER INCOME SOURCE			\$	
PREVIOUS EMPLOYER OR SCHOOL			HOW LONG? YRS. MOS.		PREVIOUS EMPLOYER OR SCHOOL			HOW LONG? YRS. MOS.	

REFERENCES						
AUTO CREDIT REFERENCE (A/C #)		TRADING? YES NO	BALANCE	AUTO CREDIT REFERENCE (A/C #)		
			\$			
OTHER CREDIT REFERENCE			BALANCE	OTHER CREDIT REFERENCE		
			\$			
NEAREST RELATIVE (NOT LIVING WITH YOU)			RELATIONSHIP	NEAREST RELATIVE (NOT LIVING WITH YOU)		
ADDRESS			PHONE ()	ADDRESS		
FRIEND OR RELATIVE			PHONE ()	FRIEND OR RELATIVE		
			()			

SIGN

NOTICE: I, THE UNDERSIGNED, HEREBY AUTHORIZE THE DEALER, INFINITI FINANCIAL SERVICES, NISSAN-INFINITI LT AND/OR _____ (COLLECTIVELY "PROSPECTIVE CREDITORS") TO VERIFY CREDIT AND EMPLOYMENT HISTORY AS STATED ABOVE AND TO ANSWER QUESTIONS ABOUT CREDIT EXPERIENCE WITH ME. IF THIS APPLICATION IS MADE PURSUANT TO ANY CREDIT PROGRAM FOR ATTENDEES AND/OR GRADUATES OF SCHOOLS OR EDUCATIONAL INSTITUTIONS, THEN PROSPECTIVE CREDITORS MAY VERIFY MY ELIGIBILITY FOR SUCH PROGRAM, INCLUDING BY INQUIRY TO MY SCHOOL(S) OR EDUCATIONAL INSTITUTION(S). INSURANCE RELATED TO THE CREDIT FOR WHICH I AM APPLYING MAY BE PURCHASED FROM AN INSURER OR AGENT OF MY CHOICE WHO MEETS PROSPECTIVE CREDITOR STANDARDS. IN CONNECTION WITH THIS APPLICATION FOR CREDIT, PROSPECTIVE CREDITORS MAY REQUEST A CONSUMER (CREDIT) REPORT. ON MY REQUEST, PROSPECTIVE CREDITORS WILL ADVISE ME IF THE REPORT WAS ACTUALLY ORDERED AND IF SO, THE NAME AND ADDRESS OF THE AGENCY THAT FURNISHED THE REPORT. PROSPECTIVE CREDITORS MAY ORDER SUBSEQUENT CONSUMER (CREDIT) REPORTS.

I AUTHORIZE PROSPECTIVE CREDITORS TO ASK MY PAST AND CURRENT CREDITORS ("CREDIT REFERENCES"), INCLUDING CREDITORS LISTED ABOVE OR ON MY CONSUMER (CREDIT) REPORT, ABOUT MY CREDIT PERFORMANCE WITH THEM. PROVISION BY PROSPECTIVE CREDITORS OF A COPY OF THIS AUTHORIZATION SHALL SERVE AS MY DIRECTION THAT MY CREDIT REFERENCES PROVIDE MY CREDIT PERFORMANCE INFORMATION.

EVERYTHING THAT I HAVE STATED IN THIS APPLICATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND CONSTITUTES MY ENTIRE APPLICATION FOR CREDIT WITH THE PROSPECTIVE CREDITORS. I UNDERSTAND THAT PROSPECTIVE CREDITORS WILL RETAIN THIS APPLICATION WHETHER OR NOT IT IS APPROVED. I WILL NOTIFY PROSPECTIVE CREDITORS, IF APPLICABLE, WITHIN A REASONABLE TIME OF ANY CHANGE IN MY NAME, ADDRESS OR EMPLOYMENT.

TO THE EXTENT PERMITTED BY LAW, I CONSENT THAT YOU, YOUR ASSIGNEES, AND YOUR AGENTS MAY CONTACT ME AT ANY TELEPHONE NUMBER YOU HAVE FOR ME, INCLUDING ANY CELL PHONE NUMBERS AND ANY PHONE NUMBERS LISTED ON THIS DOCUMENT, BY ANY MEANS YOU SELECT, INCLUDING AN AUTOMATIC TELEPHONE DIALING SYSTEM, TEXT MESSAGING, AND/OR AN ARTIFICIAL OR PRE-RECORDED VOICE.

CO-APPLICANT'S SIGNATURE MEANS YOU INTEND TO APPLY FOR JOINT CREDIT.

X _____ SIGNATURE OF APPLICANT	DATE	X _____ SIGNATURE OF JOINT APPLICANT	DATE
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DEALER

PROPOSED FINANCING TERMS				VEHICLE DESCRIPTION					
RETAIL		LEASE		VIN					
SALES PRICE	\$ _____	GROSS CAP	\$ _____	<input type="checkbox"/> NEW <input type="checkbox"/> USED <input type="checkbox"/> DEMO YEAR _____ MAKE _____ MODEL _____		USED VALUE GUIDE: <input type="checkbox"/> NADA <input type="checkbox"/> KELLEY <input type="checkbox"/> BLACK BOOK BOOK VALUE \$ _____ MILEAGE _____		TRADE IN: YEAR _____ MAKE _____ MODEL _____	
DOWN PAYMENT	\$ _____	REDUCTION	\$ _____						
NET TRADE	\$ _____	ADJUSTED CAP	\$ _____						
AMT FINANCED	\$ _____	MSRP	\$ _____						
PROGRAM _____		PROGRAM _____							
TERM _____		PAYMENT _____ TERM _____							

In states where leasing is available through Nissan-Infiniti LT, Infiniti Financial Services acts as Servicer for Nissan-Infiniti LT for lease applications.

