

Sterling® Acceptance Boat Loan Application



- Individual** I am applying for an individual account in my own name, and am relying on my own income and assets, and not the income or assets of another person, as the basis for repayment of the credit requested.
 Purchase
 Joint We are applying for joint credit, and are relying on our joint income and assets as the basis for repayment for the credit requested.
 Refinance
 LLC, Corporation, Trust

APPLICANT

NAME First Middle Last			U.S. CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE OF BIRTH M/D/Y
STREET ADDRESS				CITY	STATE ZIP
PREVIOUS ADDRESS (if less than five years at current address)					YEARS THERE
<input type="checkbox"/> NOW RENTING <input type="checkbox"/> BUYING <input type="checkbox"/> HOME PAID FOR		<input type="checkbox"/> LIVE WITH RELATIVE <input type="checkbox"/> OTHER		MONTHLY PAYMENT \$	MORTGAGE HOLDER OR LANDLORD
IF BUYING (or paid for) MONTH AND YEAR PURCHASED			PRICE PAID \$	AMOUNT OWED \$	MORTGAGE ACCT.# EST. MARKET VALUE \$
SOCIAL SECURITY NO.			HOME PHONE NO.		# DEPENDENTS
DRIVERS LICENSE #		STATE	DATE OF ISSUE	EXPIRATION DATE	
EMPLOYER				PERCENT OWNED	
ADDRESS				EMAIL ADDRESS	
JOB TITLE OR POSITION		SALARY (GROSS) PER <input type="checkbox"/> YEAR <input type="checkbox"/> MONTH <input type="checkbox"/> HOUR		YEARS THERE	BUSINESS PHONE & EXT.
PREVIOUS EMPLOYER		JOB TITLE OR POSITION		YEARS THERE	FAX#
OTHER INCOME (alimony, child support, maintenance payments need not be revealed if you do not wish to rely upon such income for approval)				<input type="checkbox"/> Annually <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly	SOURCE CELL PHONE
CURRENT BOAT MAKE	MODEL/LENGTH	YEAR	PAID FOR <input type="checkbox"/> YES <input type="checkbox"/> NO	FINANCED BY (even if paid off)	MONTHLY PAYMENT \$

ACKNOWLEDGMENT BY CO-APPLICANT: By providing Co-Applicant information, you confirm your intent to apply for joint credit and be jointly liable for the debt.

CO-APPLICANT

NAME First Middle Last			U.S. CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO		RELATIONSHIP (if any) TO APPLICANT	DATE OF BIRTH M/D/Y
STREET ADDRESS				CITY	STATE ZIP CODE	YEARS THERE
<input type="checkbox"/> NOW RENTING <input type="checkbox"/> BUYING <input type="checkbox"/> HOME PAID FOR		<input type="checkbox"/> LIVE WITH RELATIVES <input type="checkbox"/> OTHER		MONTHLY PAYMENT \$	MORTGAGE HOLDER OR LANDLORD	
SOCIAL SECURITY NO.			HOME PHONE NO.		# DEPENDENTS	
DRIVERS LICENSE #		STATE	DATE OF ISSUE	EXPIRATION DATE		
EMPLOYER		ADDRESS				BUSINESS PHONE NO. & EXT.
JOB TITLE OR POSITION		SALARY (GROSS) PER <input type="checkbox"/> YEAR <input type="checkbox"/> MONTH <input type="checkbox"/> HOUR		YEARS THERE	CELL PHONE	
OTHER INCOME (alimony, child support, maintenance payments need not be revealed if you do not wish to rely upon such income for approval)				<input type="checkbox"/> Annually <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly	SOURCE	EMAIL ADDRESS

BOAT DETAILS

MANUFACTURER		MODEL		YEAR	<input type="checkbox"/> NEW <input type="checkbox"/> USED
OVERALL LENGTH		REGISTRATION / DOCUMENTATION NO.			HULL NO.
BOAT WILL BE USED FOR:		ENGINE(S) MAKE		H.P.	ENGINE SERIAL NUMBER(S)
<input type="checkbox"/> PLEASURE <input type="checkbox"/> CHARTER <input type="checkbox"/> PRIMARY RESIDENCE				<input type="checkbox"/> SINGLE <input type="checkbox"/> TWIN	
ANCHORAGE OR MOORING LOCATION				NAVIGATION AREA	
DEALER OR SELLER NAME		DEALER OR SELLER PHONE NO.		DEALER OR SELLER ADDRESS	
PREVIOUS BOAT(S) OWNED		YEARS OF BOATING EXPERIENCE		PURCHASE PRICE _____ SALES TAX _____ TOTAL PURCHASE PRICE _____ DOWN PAYMENT _____ AMOUNT TO BE FINANCED _____ REQUESTED TERM (MOS) _____ RATE _____	
HOW DID YOU HEAR ABOUT US?					
INSURANCE AGENT NAME & PHONE #					
INSURANCE BINDER # / POLICY #					
NAME(S) IN WHICH BOAT WILL BE OWNED					

Sterling® Acceptance Corporation

To expedite your loan decision, please attach your past 2 years personal tax returns with schedules
If self-employed, 2yrs. corporate returns are also required.

Corporate Headquarters
1 Melvin Avenue
Annapolis, MD 21401

410.268.1545 / 800.525.0554
Fax 410.268.3755
financing@sterlingacceptance.com

ASSETS					LIABILITIES		
CASH ON HAND AND IN BANKS							
BANK	OWNER NAME	AMOUNT					
DEPOSIT ON BOAT BEING PURCHASED (If already made)							
TOTAL \$							
STOCKS AND SECURITIES/BROKERAGE ACCOUNTS							
NAME/DESCRIPTION	OWNER NAME	VALUE					
TOTAL \$							
RETIREMENT ACCOUNTS					CREDIT CARDS		
COMPANY NAME		AMOUNT			LENDER	MONTHLY PAYMENTS	BALANCE
TOTAL \$					TOTAL \$		
REAL ESTATE				REAL ESTATE LOANS		MONTHLY PAYMENTS	
ADDRESS	MONTHLY RENTAL INCOME	YEAR PURCHASED	MARKET VALUE	MORTGAGE HOLDERS NAME			BALANCE
TOTAL \$				TOTAL \$			
AUTOMOBILE/BOATS				AUTOMOBILE/BOAT LOANS			
TYPE YEAR & MODEL		CURRENT VALUE		LENDER NAME		BALANCE	
CURRENT BOAT				BOAT LOAN			
TOTAL \$				TOTAL \$			
OTHER ASSETS				OTHER LIABILITIES			
DESCRIPTION		CURRENT VALUE		TYPE/DESCRIPTION		MONTHLY PAYMENTS	
TOTAL \$				TOTAL \$			
TOTAL ASSETS \$				TOTAL LIABILITIES \$			
				NET WORTH (ASSETS - LIABILITIES) \$			

PATRIOT ACT CUSTOMER IDENTIFICATION:
The U.S. government, in order to fight the funding of terrorism and money laundering, has issued a law requiring all financial institutions to obtain, verify and record information that identifies each person who opens an account.

I/we acknowledge that I/we have made this application with the intent that you should rely upon the information contained herein in granting the credit requested. I/we understand that, if the requested credit is granted, you may report information concerning the credit to consumer reporting agencies and to others. I/we affirm that my/our answers are complete and true and authorize you to verify or obtain any information concerning them. Upon your request, I/we further authorize any firm or individual from whom I/we may have obtained or requested credit, to furnish you with the details of that transaction. I/we also agree to provide current financial information upon request, in a form acceptable to you.

APPLICANT'S SIGNATURE	DATE	CO-APPLICANT'S SIGNATURE	DATE
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