



Cash America Financial Services, Inc.

AUTO EQUITY LOAN

1-877-27-GET CASH (877-274-3822)

Fax 877-715-0107

www.autoequitycash.com

Loan Application Checklist - GEORGIA

NOTICE: Please be advised that we cannot process your loan request without ALL of the items listed below. Failure to provide these items will delay the third-party lender in processing your loan.

Please fax the following items to 877-715-0107 or Email scanned documents to AutoEquityLoan@CashAmerica.com as part of your application process.

- ___ Title – Georgia only accepted
- ___ Registration (optional)
- ___ Proof of Insurance **Comp and Collision Required*
- ___ Proof of income – Current pay stub which shows YTD earnings. If no YTD earnings, we will need the last four pay stubs. If you have other sources of income, we require your last three bank statements (all pages) as evidence of your ability to repay the loan.
- ___ Phone bill – **All pages, dated within the last 30 days.** Disconnect notices are not acceptable.
- ___ Proof of residence – Mail addressed to you at home address, other than your phone bill, postmarked no more than 30 days prior to contract date. Must include content of the mail, not the envelope. (Suggested: cable bill, gas bill, credit card bill)
- ___ Driver's License – Georgia only accepted
- ___ Proof of Social Security Number – Social Security Card or printed document showing Social Security Number.
- ___ Application **Signed Original Needed*
- ___ Reference List

If you have faxed the documents, you must bring in the originals to verify authenticity!

THE VEHICLE BEING USED TO SECURE THE LOAN MUST BE BROUGHT IN FOR LOAN APPOINTMENT

(Please Print)		GEORGIA		Referring Store # _____
CashAmerica[®]				
CASH AMERICA FINANCIAL SERVICES, INC. - AUTO EQUITY LOAN CUSTOMER APPLICATION				
APPLICANT INFORMATION		<i>(An applicant, if married, may apply for a separate account)</i>		
How did you hear about us?			Date:	
Name :				
Address:				
Apt. No.:	City:	State:	Zip:	
Home Phone No:	Fax Number:	Cell / Pager #:		
E-mail Address:		How Long at this address?		
Social Security #:	DL# and State:	DOB:		
Previous Address:		Apt. No.:		
City:	State:	Zip:	How long at this address?	
Place of Employment:			Position:	
Address:			Suite #:	
City:	State:	Zip:	Work Phone (+ext):	
Supervisor:	How long at this job?	Gross Pay (Per Month) \$		
List Other Sources of Income:		Monthly Amount \$		
Alimony, child support, or separate maintenance income need not be disclosed unless you wish to have it considered as a basis of repaying this obligation.				
Alimony, child support or separate maintenance received under: Court Order <input type="checkbox"/> Written agreement <input type="checkbox"/> Oral understanding <input type="checkbox"/>				
CO-APPLICANT		<i>(An applicant, if married, may apply for a separate account)</i>		
Name:				
Address:			Apt.:	
City:	State:	Zip:		
Home Phone:	Place of Employment:			
Work Address:	Position:	City:		
State:	Zip:	Work Phone (+ext.):		
Supervisor:	Social Security #:			
DL # and State:	DOB:	Gross Pay (Per Month)\$		
List Other Sources of Income:		Monthly Amount \$		
Alimony, child support, or separate maintenance income need not be disclosed unless you wish to have it considered as a basis of repaying this obligation.				
Alimony, child support or separate maintenance received under: Court Order <input type="checkbox"/> Written agreement <input type="checkbox"/> Oral understanding <input type="checkbox"/>				
LANDLORD / MORTGAGE CO. INFORMATION				
Landlord or Mortgage Co. Name:			Rent/Mortgage Pmt \$	
Address:			Apt.: or Account No.	
City:	State:	Zip:	Phone #:	
AUTOMOBILE INFORMATION				
Year:	Make:	Model:	Trim:	
Auto	Manual	Plate:	Vin:	
Actual Mileage	Do you have the pink slip? YES / NO			
Insurance Co.:	Phone #:			
Policy #	Full Coverage: YES / NO			
I (We) hereby authorize Cash America Financial Services, Inc. (CAFSI) to make all inquiries it considers appropriate concerning the information I (we) have given herein, including making inquiries with any credit bureau(s) and title search companies. I (We) understand that CAFSI's capacity in this transaction will be as lender and that CAFSI may sell or assign the loan to another lender /servicer.				
SIGNATURE		CO-APPLICANT SIGNATURE		



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REFERENCE LIST - GEORGIA

(Must be completed in full & submitted to Cash America Auto Equity Loan Department with each application package. No P.O. Box will be accepted)

Applicant Name _____

Applicant phone (home) _____ (cell) _____

1. RELATIVE

Name _____

Address _____

City _____

Home # _____

Work # _____

2. RELATIVE

Name _____

Address _____

City _____

Home # _____

Work # _____

3. RELATIVE

Name _____

Address _____

City _____

Home # _____

Work # _____

4. FRIEND

Name _____

Address _____

City _____

Home # _____

Work # _____

5. FRIEND

Name _____

Address _____

City _____

Home # _____

Work # _____

6. FRIEND

Name _____

Address _____

City _____

Home # _____

Work # _____

All references will be contacted & verified prior to final loan approval.