



MARINE FINANCING APPLICATION

To Apply for Credit

Complete the application and submit it to us by mail or E-mail per the instructions below, along with the following:

1. Copy of paystubs within the last 30 days
2. Two years of current Personal Income Tax returns with supporting schedules
3. Proof of liquid assets
- If self-employed:*
4. YTD Financial statement (including balance sheet & profit/loss statement)
5. Two years current federal business tax returns

Submit by Mail	Submit by E-mail
<p style="text-align: center;">To submit by mail, send to:</p> <p style="text-align: center;">LH-Finance Credit Department 6958 Aviation Blvd, Suite A Glen Burnie, MD 21061</p>	<p style="text-align: center;">To submit by E-mail, send an E-mail without any personal information to:</p> <p style="text-align: center;">underwriting@LH-Finance.com</p> <p style="text-align: center;">We will respond to you with an encrypted E-mail so that you can send your application securely to us.</p>

Notice: The information contained in this application is provided for the purpose of obtaining credit with LH-Finance on behalf of the applicant(s), the applicant's firm or corporation, on whose behalf the applicant(s) may either severally or jointly with others, execute a guaranty in your favor. Each applicant understands that you are relying on the information provided to be true and accurate and that you may consider the information contained in this application as being true and accurate until a written notice of change is given to you by the applicant. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein and to my/our creditworthiness, including pulling credit reports from the Credit Bureaus. You are authorized to answer questions about your credit experience with me/us.

Important information about opening your new account:

To help fight funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

* 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 obligation.

LH-FINANCE LOAN APPLICATION						underwriting@LH-Finance.com						
REGULATION B – REQUIRED FOR JOINT APPLICATION (INTENT TO APPLY JOINTLY MUST BE SHOW BY INITIALING HERE)												
<input type="checkbox"/> WE INTEND TO APPLY FOR JOINT CREDIT: APPLICANT: _____ CO-APPLICANT: _____												
PURCHASE PRICE		BOAT YEAR		BOAT MAKE		BOAT MODEL		LENGTH		<input type="checkbox"/> FIBERGLASS <input type="checkbox"/> METAL <input type="checkbox"/> OTHER		
SALES TAX		ENGINE YEAR		ENGINE MAKE		H.P. EACH		<input type="checkbox"/> GASOLINE <input type="checkbox"/> DIESEL		<input type="checkbox"/> SINGLE <input type="checkbox"/> TWIN <input type="checkbox"/> TRIPLE		
DOWN PAYMENT		INTENDED USE: <input type="checkbox"/> PERSONAL <input type="checkbox"/> PERSONAL RESIDENCE <input type="checkbox"/> LIMITED CHARTER <input type="checkbox"/> FULL TIME CHARTER										
FINANCE AMOUNT		TRADE YEAR		TRADE MAKE		TRADE MODEL		LENGTH		<input type="checkbox"/> FIBERGLASS <input type="checkbox"/> METAL <input type="checkbox"/> OTHER		
SELLER/BROKER/DEALER				REQUESTED TERM <input type="checkbox"/> 20 <input type="checkbox"/> 15 <input type="checkbox"/> 10		HOW DID YOU HEAR ABOUT US?						
ANY INTEREST IN OPENING A BANK ACCOUNT WITH US? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> I'D LIKE MORE INFORMATION												
APPLICANT												
FULL NAME				SOCIAL SECURITY NUMBER		DATE OF BIRTH		ARE YOU A US CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO				
STREET ADDRESS				CITY		STATE		ZIP CODE		RENT OWN YEARS		
EMPLOYER NAME/ADDRESS				POSITION/TITLE		TOTAL ANNUAL INCOME				YEARS		
EMAIL ADDRESS				CELL PHONE		HOME PHONE		WORK PHONE				
MARITAL STATUS				NEAREST RELATIVE (not living w/you)		RELATIONSHIP		HOME PHONE				
CO-APPLICANT												
FULL NAME				SOCIAL SECURITY NUMBER		DATE OF BIRTH		ARE YOU A US CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO				
STREET ADDRESS				CITY		STATE		ZIP CODE		RENT OWN YEARS		
EMPLOYER NAME/ADDRESS				POSITION/TITLE		TOTAL ANNUAL INCOME				YEARS		
EMAIL ADDRESS				CELL PHONE		HOME PHONE		WORK PHONE				
MARITAL STATUS				NEAREST RELATIVE (not living w/you)		RELATIONSHIP		HOME PHONE				
CREDIT INFORMATION												
HAS AN APPLICANT EVER DECLARED BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO												
DOES AN APPLICANT MAKE CHILD SUPPORT OR ALIMONY PAYMENTS*? <input type="checkbox"/> YES <input type="checkbox"/> NO												
ASSETS						LIABILITIES						
CURRENT ASSETS			TOTAL OF BALANCES			CREDIT CARDS/ LINES OF CREDIT		MO. PAYMENT		TOTAL OF BALANCES		
CHECKING/SAVINGS/MONEYMARKET ACCOUNTS												
BROKERAGE ACCOUNTS												
RETIREMENT ACCOUNTS (401K, IRA)												
TOTAL						TOTAL						
REAL ESTATE DESCRIPTION	INCOME PROP? <input type="checkbox"/> YES <input type="checkbox"/> NO	RENT INCOME		ESTIMATED VALUE		MISC. LOANS		MO. PAYMENT		BALANCE		
	<input type="checkbox"/> YES <input type="checkbox"/> NO											
	<input type="checkbox"/> YES <input type="checkbox"/> NO											
	<input type="checkbox"/> YES <input type="checkbox"/> NO											
TOTAL						TOTAL						
MISC. ASSETS (AUTOS, BOATS, RV'S ETC) PLEASE DESCRIBE			ESTIMATED VALUE			MISC. LOANS		MO. PAYMENT		BALANCE		
TOTAL						TOTAL						
TOTAL ASSETS						TOTAL		TOTAL LIABILITIES				
NET WORTH												
<small>All the statements i/We have made are true and correct, and I understand you will rely upon them. Any financial institution or finance company to which applicant or co-applicant (Or seller/broker on behalf of applicant or co-applicant) may apply for financing on the boat described above is hereby authorized to investigate the credit history and capability of applicant or co-applicant. In connection with this credit application or any subsequent credit update or credit renewal, any proposed credit granting party may request a consumer report concerning the applicant and/or co-applicant. The applicant and/or co-applicant may ask whether the creditor obtained such a report. If such a report has been obtained, the applicant and/or co-applicant may request the name and address of the reporting agency that provided the report. PATRIOT ACT NOTICE – REQUIRED INFORMATION FOR ALL APPLICATIONS: To help the US Government fight the funding of terrorism and money laundering, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.</small>												
APPLICANT DRIVER'S LICENSE #		STATE	DATE ISSUED		DATE EXPIRES		CO-APPLICANT DRIVERS LICENSE #		STATE	DATE ISSUED		DATE EXPIRES
APPLICANT SIGNATURE				DATE		CO-APPLICANT SIGNATURE				DATE		