Date			Handi-House Financial Corp.				Pope's			
Amount Applied For \$			P. O. Box 295				-	Utility Buildings		
Building Size			Swainsboro, GA 30401				4015 Orient Road			
Total Price \$			Phone: 1.800.922.2023				Tampa, FL 33610			
Down Payment \$			478.237.3703			(813) 626-6289				
No. of Payments	• ,		_		. 1	1 1	. 1	TT1 : :11		
Please complete all					irs residence a	and employ	ment history	. This will		
enable your applicat										
A. Your Personal			Please prin	•	d information (o		or Not Applica		riate).	
Last Name First Name		irst Name	Initial		Social Securi	Social Security No.		Date of Birth		
Present Street Address	<u>'</u>		Apt. No.	City	•		State	Zip Code		
Date of Residence Telephone No.			□Own □Rent	☐ Buying ☐ Other	Monthly Ren Mortgage Pa					
Previous Home Address			City		State Zip Code		Dates of Residence		dence	
						<u> </u>		From To		
Present Employer			Employer's Address				Business Phone No.			
Your Position			Date of Employment		Weekly Income: Gross \$ Monthly Income: Gross \$		Net \$ Net \$			
Previous Employer			Address					Dates of Employment From To		
Number of Dependents	Nearest Relative	Nearest Relative's Name		, <u>I</u>		Address				
Other Income Source*	ncome Source*			nce (date):	Monthly Inco	Monthly Income: Gross \$ Net \$				
			*OTHER IN	NCOME You	do not have to list	alimony, child s	support or mainte	nance unless		
B. Your Banking	References		you want us	to consider it in	n order to obtain t	his credit.				
Checking ☐ Savings ☐	gs 🗆			Address			City State		State	
Checking ☐ Savings ☐										
C. Credit Referer	ıces		Include Join	nt applicant's ref	ferences, if joint ac	ecount is request	ted.		1	
	Name			City/State	-	Monthly Pay		Balance Due		
Bank Loan	110110			Cityrotate		\$		\$		
Finance Company						\$		\$		
Department Store				\$		\$				
Department Store						\$		\$		
C 4'4 C 4 C						\$		\$		
Credit Card Company	+							\$		
						\$				
						\$		\$		
Auto Year & Model		+				\$		\$		
						\$		\$		
Financed By:						\$		\$		
Other Financial Obligation					\$		\$			
Home						\$		\$		
						\$		\$		
The undersigned certify that assignee to extend credit. T dealer and/or assignee to inv	he undersigned furthe	er certify that	there are no la	awsuits pending	g or unpaid judgm	ents unless men	tioned above. Tl	ne undersigned a	uthorize	
Si		_		Signature (Co-Applicant)						
Date					Date					