

Walk-In Mail-In Telephone

Section A-Please Tell Us What You Want to Borrow

Amount of Loan \$ _____ **Number of Months (Term):** _____

I am applying for: **Purpose:**

Installment Loan

Type of Equipment _____

Home Modifications

Automobile with Modifications

Ramp

Vehicle Modifications

If you are securing your loan, please describe your collateral: _____

Section B-Please Tell Us About Yourself

First Name	Initial	Last Name	Date of Birth / /	Social Security No.
Home Address (Other than P.O. Box)		City	State	Zip
Mailing Address (If different from home address)		City	State	Zip
Home Phone () ()	Cellular Phone () ()	Pager Phone () ()	Fax Phone () () <input type="checkbox"/> Home <input type="checkbox"/> Business	Internet Address
<input type="checkbox"/> Rent <input type="checkbox"/> Own/Buying	<input type="checkbox"/> Live W/Others	Monthly Rent/Mortgage Payment \$	Landlord / Mortgagor	Yrs/Mths There Yrs. Mths.
Previous Address (if less than 2 years at above)		City	State	ZIP Yrs/Mths There Yrs. Mths.
Name and Address of Employer*		Position / Occupation	Yrs/Mths There Yrs. Mths.	Business Phone () Gross Annual Salary \$
Name and Address of Previous Employer* (If less than 2 years at current employment.)			Position / Occupation	Yrs/Mths There Yrs. Mths.
Note: You do not have to include information about income from alimony, child support or separate maintenance payments, unless you want us to consider this income in connection with this application for credit.			Source of Other Income	Annual Amount \$
Is any of your income nontaxable? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, how much?		
Checking Account <input type="checkbox"/> Yes <input type="checkbox"/> No	Bank	Savings Account <input type="checkbox"/> Yes <input type="checkbox"/> No	Bank	
Name and Address of Closest Relative Not Living At Your Address		Relationship	Home Phone ()	
Are You a Permanent US Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No		(Do not complete if this is an application for individual, unsecured credit)		
If No, What is the Current Expiration Date of your current Visa? _____		Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, and widowed)		

* If you are self-employed, on commission, or most of your income is from a source other than salary, please attach a copy of your last two years' federal tax returns.

Section C-Please Tell Us About Your Co-Applicant

First Name	Initial	Last Name	Date of Birth / /	Social Security No.
Home Address (Other than P.O. Box)		City	State	Zip
Mailing Address (if different from home address)		City	State	Zip
Home Phone () ()	Cellular Phone () ()	Pager Phone () ()	Fax Phone () () <input type="checkbox"/> Home <input type="checkbox"/> Business	Internet Address
<input type="checkbox"/> Rent <input type="checkbox"/> Own/Buying	<input type="checkbox"/> Live W/Others	Monthly Rent/Mortgage Payment \$	Landlord / Mortgagor	Yrs/Mths There Yrs. Mths.
Previous Address (if less than 2 years at above)		City	State	ZIP Yrs/Mths There Yrs. Mths.
Name and Address of Employer*		Position / Occupation	Yrs/Mths There Yrs. Mths.	Business Phone () Gross Annual Salary \$
Name and Address of Previous Employer* (If less than 2 years at current employment.)			Position / Occupation	Yrs/Mths There Yrs. Mths.
Note: You do not have to include information about income from alimony, child support or separate maintenance payments, unless you want us to consider this income in connection with this application for credit.			Source of Other Income	Annual Amount \$
Is any of your income nontaxable? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, how much?		
Checking Account <input type="checkbox"/> Yes <input type="checkbox"/> No	Bank	Savings Account <input type="checkbox"/> Yes <input type="checkbox"/> No	Bank	
Name and Address of Closest Relative Not Living At Your Address		Relationship	Home Phone ()	
Are You a Permanent US Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No		(Do not complete if this is an application for individual, unsecured credit.)		
If No, What is the Current Expiration Date of Visa? _____		Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, and widowed)		

* If you are self-employed, on commission, or most of your income is from a source other than salary, please attach a copy of your last two years' federal tax returns.

Be sure to complete the second page of this application

Section D-Please Tell Us About Your Financial Obligations

List all your current obligations, including financial institutions, department stores, credit cards, leases, unpaid taxes, alimony and child support, etc. (Additional space available below).

Responsibility		Creditor	Current Outstanding Balance	Monthly Payment (or other term)	Check if debts to be paid by this loan
Applicant	Co-Applicant				
			\$	\$	

Section E-Information for Government Monitoring Purposes

Complete **only** if your loan will be used for home improvement or to refinance a home improvement loan, or if you are purchasing a residential dwelling (including a mobile home or a boat used as your primary residence) and this loan will be secured by the dwelling, or if you are refinancing a loan used to purchase a dwelling.

DO NOT complete for credit lines. This information is for government monitoring purposes only. The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the Lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish the information, under federal regulations the Lender is required to note race or national origin and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box and initial below.

Applicant: _____ I do not wish to furnish this information
Please Initial

Co-Applicant: _____ I do not wish to furnish this information
Please Initial

Race or National Origin:

- 1 American Indian, Alaskan Native
 3 Black
 5 White
 2 Asian, Pacific Islander
 4 Hispanic
 6 Other (specify) _____

Race or National Origin:

- 1 American Indian, Alaskan Native
 3 Black
 5 White
 2 Asian, Pacific Islander
 4 Hispanic
 6 Other (specify) _____

Sex: 1 Male 2 Female By Observation

Sex: 1 Male 2 Female By Observation

Address of property to be purchased or refinanced:

Street Address _____ City, State, ZIP _____

I/We authorize NewWell Fund / ATLFA (the Creditor) to make credit inquiries necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on this application. I/We authorize and instruct any person, including but not limited to, all local, state or federal governmental agencies, or consumer reporting agencies, to complete and furnish the Creditor any information that it may have or obtain in response to such credit inquiries, and agree that such information, along with this application, shall remain the Creditor's property whether or not credit is extended. I/We authorize NewWell Fund to disclose any information in or relating to this application and/or loan account (including information received from third persons) to any applicant for or guarantor of this credit, to any of ATLFA subsidiaries, affiliates and assigns, to any potential assignee, transferee or participant in the credit to which this application relates. In the event you do not want us to share certain information with our affiliates, other than information about our own transactions and experience with you, you must write us at: NewWell Fund / ATLFA, 1602 Rolling Hills Dr., Suite 107, Richmond, VA 23229 and include your name, address and account number so that we may process your request. I/We certify that the informatin provided in this application is beng given for the purpose of obtaining the credit described above and is true and correct as of this date.

Applicant's Signature _____	Date _____	Co-Applicant's Signature _____	Date _____
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Please use this space for any additional obligations:

Responsibility		Creditor	Current Outstanding Balance	Monthly Payment (Or other Term)	Check if Debts to be paid by this loan
Applicant	Co-Applicant				
			\$	\$	

Please use this space for any additional information:

For Office Use/Distribution Of Proceeds Only: