

LEBANON PA'S LARGEST AND OLDEST FURNITURE STORE

HAROLD'S FURNITURE

Credit Application Form

Print out form, fill out all the required information and bring it to the store.

APPLICANT'S INFORMATION: *(Please print clearly)*

▶ _____
Name Middle Initial Last Name

▶ _____ / / _____
Social Security Number Date of Birth (mm/dd/yyyy)

▶ _____ ▶ Rent Own
Street Address (include apartment number if applicable) (Please Check One)

▶ _____
City State Zip Code

▶ _____
Email Address (optional: By providing email you consent to receive specials and announcements)

▶ () ()
Home Phone Cell Phone

▶ _____
Employer Estimated Annual Income

▶ _____
Years with Current Employer Work Phone

CO-APPLICANT'S INFORMATION: *(If applying jointly)*

▶ _____
Name Middle Initial Last Name

▶ _____ / / _____
Social Security Number Date of Birth (mm/dd/yyyy)

▶ _____ ▶ Rent Own
Street Address (include apartment number if applicable) (Please Check One)

▶ _____
City State Zip Code

▶ _____
Email Address (optional: By providing email you consent to receive specials and announcements)

▶ () ()
Home Phone Cell Phone

▶ _____
Employer Estimated Annual Income

▶ _____
Years with Current Employer Work Phone

By signing below you agree that all the information you provided above is true and accurate.

Signature of Applicant Date

Signature of Co-Applicant Date