



KWIK COMFORT CONSUMER APPLICATION - M9 KWI

PLEASE READ THE ATTACHED DISCLOSURES AND SIGN BELOW BEFORE SUBMITTING YOUR APPLICATION. **APPLICATION MUST BE SIGNED.** Please print in CAPITAL LETTERS and avoid contact with the lines: $_1 S_1 M_1 I_1 T_1 H_1$

APPLICANT	riodos printini sai maz zemento dina arona contact unan dio mico.
First Name M.	
	Do You:
Mailing Address	APT # Rent Other
City	State Zip Social Security Number
If the above address is a PO Box, you must provide a street address	
	Birth
City	State Zip Month Day Year
Your Employer	How Long (Yrs.) Total Annual Income* Business Phone
E-Mail Address(optional) By providing an E-Mail address, I consent to rec	eive E-Mail communications about my Account and authorize you to provide my E-Mail address to Kwik Comfort so that I
may receive such communications, offers and updates. Nearest Relative Not Living With You:	*NOTE: Alimony, child support or separate maintenance payments need not be disclosed unless relied upon for credit.
Name Address For WI residents, if you are applying for individual credit or joint credit with so	City State Zip Home Phone meone who is not your spouse, combine your and your spouse's financial information on this application form.
JOINT APPLICANT	
First Name M.	Initial Last Name
I II ST I VALITE M.	Relationship Scourse Other
Mailing Address	APT # to Applicant Spouse Cuter
City	State Zip Social Security Number Birth
- - - Home Phone	Date Month Day Year
	\$
Your Employer	How Long (Yrs.) Total Annual Income* Business Phone
PROTECT YOUR CREDIT CARD ACC	OUNT WITH DEBT SECURITY - (OPTIONAL)
	chase Debt Security to get credit. I have received and read the disclosures that are set forth below and in the Debt Security Summ \$100 of the average daily balance of my Account as provided in the terms of the Debt Security agreement. I may cancel any time
Debt Security is not available for residents of Alabama and Mississippi.	re to Enroll X Store associates who solicit applications for Debt Security must read the following disclosure to the customer:
	bbt Security will not affect your application for credit or the terms of any existing credit agreement you have with us. 2) We will give his information will include a copy of the contract containing the terms of Debt Security. 3) There are eligibility requirements,
conditions, and exclusions that could prevent you from receiving benefits unde	r Debt Security. 4) You should carefully read our additional information for a full explanation of the terms of Debt Security.
APPLICANT/JOINT APPLICANT SIGNA	
I am providing the information in this application to GE Money Bank ("GI GEMB to issue me a Card. By applying for this account, I authorize and	EMB") and to dealers ("Dealers") that accept the Kwik Comfort Credit Card ("Card") and to program sponsors, and askin agree that:
GEMB may furnish this and other information about me (even if my applica records, and to provide me with service and special offers.	tion is denied) and my account to Dealers and program sponsors (and their respective affiliates) to create and update their
GEMB may make inquiries it considers necessary (including requesting report of the considers necessary).	ports from consumer reporting agencies and other sources) in evaluating my application, and for purposes of reviewing,
maintaining or collecting my account. • If my application is approved, the Kwik Comfort Credit Card Agreement ("A	
	OVISION THAT MAY LIMIT MY RIGHTS UNLESS I REJECT THAT PROVISION UNDER THE AGREEMENT'S INSTRUCTIONS dit extended; and (3) grants GEMB a security interest in the goods purchased on the account as permitted by law.
	MB, including without limitation, each phone number, email address, and/or text message address, (2) for all purposes, including unication (such as calling or sending a text message to my cellular phone) and (4) using automated equipment.
This application and the Agreement are governed by federal law and Utah law	
me credit and that I authorize SFC to make inquiries they consider necessary	, including requesting reports from consumer reporting agencies and other sources, in evaluating my credit.
Federal law requires us to obtain, verify and record information that ider purpose.	tifies you when you open an account. We will use your name, address, date of birth, and other information for this
Χ	X
Applicant Signature Date	Joint Applicant Signature Date
THIS SECTION MUST BE COMPLETED	BY THE DEALER
Applicants Drimary ID /Type Number Issuing State For / See ID (S. 11) T.	to and leaver) Eva
Applicant's Primary ID (Type, Number, Issuing State) Exp. / Sec. ID (Credit Typ	pe and Issuer) Exp. Joint Applicant's Primary ID (Type, Number, Issuing State) Exp. / Sec. ID (Credit Type and Issuer) Exp. Dealer
Account#	Fax # -
Dealer# [5 3 4 8 1 2	Dealer
Contact	Amount \$ 17413
Name	Requested Light 1, Light 1, Light 2, Li

