

Massey Yacht Financial Services, Inc.

Contact: Alice Winter (941) 723-1949 ext 221 Fax (941) 757-1016

Dealer:
Massey Enterprises, Inc.

Applicant

First Name	Middle	Last	Social Security Number	Date of Birth	Home Phone Number ()
Present Address				City	State Zip Code
Mortgage Holder/Landlord			Buying/Renting/Living with Parents/Own Free &	Monthly Rent/Mortgage	Time at Residence ____ Years ____ Months
Previous Address (Street, City, State and Zip Code) (Complete if less than three year at present address)					Time at Residence ____ Years ____ Months
Drivers License Number/State Issued			Banking Reference		
Name and Address of Relative Not Living With You				Relationship	Home Phone Number ()

Applicant Employment

Present Employer Name (If Self-Employed Please List Business Name)		City, State	Employer's Phone Number ()
Gross Yearly Income (Before Taxes)	Applicant's Occupation of Job Title(if Military, State Rank)		Time At Job/In Business ____ Years ____ Months
Source of Additional Income (Rental/Pension/Alimony/Social Security/Child Support)			Yearly Gross Additional Income
Previous Employer (Complete if less than two years at present job)		Occupation or Job Title	Time At Job/In Business ____ Years ____ Months

Co-Applicant

First Name	Middle	Last	Social Security Number	Date of Birth	Home Phone Number ()
Present Address				City	State Zip Code
Banking Reference					
Drivers License Number/State Issued			Relationship to Applicant		

Co-Applicant Employment

Present Employer Name (If Self-Employed Please List Business Name)		City, State	Employer's Phone Number ()
Gross Yearly Income (Before Taxes)	Applicant's Occupation of Job Title(if Military, State Rank)		Time At Job/In Business ____ Years ____ Months
Source of Additional Income (Rental/Pension/Alimony/Social Security/Child Support)			Yearly Gross Additional Income
Previous Employer (Complete if less than two years at present job)		Occupation or Job Title	Time At Job/In Business ____ Years ____ Months

Everything I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. During the review of my application you may obtain a consumer report and if the application is approved, you may at any time in the future obtain additional consumer reports to review my account. I have the right to ask you for the name and address of the consumer reporting agency which gave the Bank the consumer report.

APPLICANT'S SIGNATURE

DATE

CO-APPLICANT SIGNATURE

DATE


Personal Financial Statement

PLEASE ATTACH ADDITIONAL SCHEDULES IF NECESSARY

Name(s) _____

Financial Statements As Of: _____

If married and a resident of a community property state(AZ, CA, ID, LA, NM, NV, TX, WA), list all debts, accounts and obligations of both spouses.
Unless you indicate otherwise, obligations of both spouses are considered community liabilities.

ASSETS												
Cash on hand and in banks		Amount										
		\$										
Deposit on boat being purchased if already made												
		Total							\$			
Marketable Stocks and Securities/Brokerage Accounts		Value										
		Total							\$			
LIABILITIES												
RETIREMENT ACCOUNTS (IRA'S/401K, ETC)		Amount			Credit Cards		Monthly Payment	Balance Outstanding				
		Total			\$		Total	\$				
REAL ESTATE					REAL ESTATE LOANS							
Address	Percent Ownership	Monthly Rental Income	Year Purchased	Market Value	Lender Name		Monthly Payment	Balance Outstanding				
		Total			\$		Total	\$				
AUTOMOBILES/BOATS		Current Value			AUTOMOBILE / BOAT LOANS		Monthly Payment	Balance Outstanding				
		Total			\$		Total	\$				
OTHER ASSETS					OTHER LIABILITIES							
Description		Current Value			Type/Description/Lender		Monthly Payment	Balance Outstanding				
		Total			\$		Total	\$				
		Total Assets			\$		Total Liabilities	\$				

APPLICANT'S SIGNATURE _____

DATE _____

CO-APPLICANT SIGNATURE _____

DATE _____