

Reproductive Care Center, LLC

LOAN APPLICATION AND CREDIT RELEASE

(Please submit this application with a \$49 payment for loan application fee)

(A \$123 payment for loan processing due at closing)

Loan approval is only guaranteed for 90 days with no financial changes, after that time you may be required to reapply

TYPE OF LOAN		
IVF PACKAGE	Are you Pre-Qualifying?	Application Date:
Single Cycle (24 month max. term)		Term of Loan in Months
Multiple Cycle Discount	Amount of Loan	6 12 24 36 48
Guaranteed Refund		
Additional Services:	Amount of Down Payment	Are you applying for credit
		Individually _____ Jointly _____

INFORMATION- APPLICANT 1		
Name:		e-mail
DOB	SSN	Phone
Current address		
City	State	Zip
Own or Rent	Monthly pmt	How long?
Current Employer		How long?
Position		Annual Income
Previous Employer		How long?
Position		Annual Income
Additional Source of Income*		

INFORMATION- APPLICANT 2		
Name:		e-mail
DOB	SSN	Phone
Current address		
City	State	Zip
Own or Rent	Monthly pmt	How long?
Current Employer		How long?
Position		Annual Income
Previous Employer		How long?
Position		Annual Income
Additional Source of Income*		

INFORMATION- APPLICANT 3		
Name:		e-mail
DOB	SSN	Phone
Current address		
City	State	Zip
Own or Rent	Monthly pmt	How long?
Current Employer		How long?
Position		Annual Income
Previous Employer		How long?
Position		Annual Income
Additional Source of Income*		

* Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

FINANCIAL INFORMATION					
ASSET	VALUE OF ASSET	LIABILITIES	NAME/CREDITOR	BALANCE	MONTHLY PAYMENT
HOME		MORTGAGE 1			
HOME		MORTGAGE 2			
AUTO 1		AUTO LOAN 1			
AUTO 2		AUTO LOAN 2			
BANK ACCOUNTS		CREDIT CARDS 1			
BANK ACCOUNTS		CREDIT CARDS 2			
OTHER		STUDENT LOANS			
OTHER		OTHER			
OTHER		OTHER			
OTHER		OTHER			
TOTAL ASSETS		TOTAL MONTHLY PAYMENT			

MISCELLANEOUS			
Are there any outstanding judgments against you?		YES	NO
Have you declared bankruptcy within the last seven years?		YES	NO
Have you had any foreclosures within the last seven years?		YES	NO
Are you a party to a lawsuit or arbitration?		YES	NO
Have you directly or indirectly been obligated on any loan which resulted in foreclosure or transfer of title in lieu of foreclosure?		YES	NO
Are you presently delinquent on any federal debt, mortgage loans or any other loan?		YES	NO
Are you obligated to pay alimony or child support?		YES	NO
**If so, how much per month? Are you current on your payments?			
Are you a co-signer on any note?	***If so, please list potential amount owed:	YES	NO
Do you currently have any unpaid medical debts?		YES	NO
Have you ever been in default on medical bills owed to a physician or hospital?		YES	NO
Is there any other significant financial information that should be disclosed?		YES	NO
Are you willing to have monthly payments deducted from your checking account?		YES	NO

NECESSARY DOCUMENTATION
- Copies of the most recent two paystubs for all applicants. If you are self employed, verification of income is required with a profit and loss statement, bank statement, etc.
- Copies of your tax returns for the last two years
Please submit the above documents with your signed application and \$44 Loan application fee.

SIGNATURES

- The undersigned certifies that the information given above is true, accurate and complete as of the signing date.
- The undersigned authorizes Reproductive Care Center, LLC. to verify the information provided on this form including credit and employment history.
- The undersigned authorizes Reproductive Care Center, LLC to obtain a consumer credit report on the undersigned. This authorization is valid for the purposes of verifying credit information given by me/us pursuant to possible consumer financing to be provided by Reproductive Care Center, LLC or for any other lawful purpose covered by the Fair Credit Reporting Act (FCRA).
- The undersigned understands that the information obtained will be treated as confidential.

Signature of Applicant 1	Date
--------------------------	------

Signature of Applicant 2	Date
--------------------------	------

Signature of Applicant 3	Date
--------------------------	------