

Credit Application for West Michigan CDL

1. Fill out application and DO NOT LEAVE ANYTHING BLANK.
 - a. Student Application - In order to process your application in a timely manner, all areas must be filled in completely and legibly. Please contact WMCDL before returning an application with blank areas.
 - b. Co-Signer - In most cases you will be required to have a co-signer. Co-Signer must fill in all of the areas completely and legibly in order to process your application in a timely manner.
2. Once you have completed the application, you have a few options:
 - a. Bring the application to WMCDL to apply in person.
 - b. Fax your application to WMCDL at 616-257-9046.
 - c. Scan your application on your computer and email the application to WMCDL.
 - i. bviszler@wmcdl.com, psloan@wmcdl.com, or kvanwagner@wmcdl.com
 - d. Take a picture of application with your phone and email to an address above.
 - e. Mail your application back to West Michigan CDL.
3. After sending in your application:
 - a. Contact West Michigan CDL and verify we have the application.
 - b. We should have an answer for you within 24 hours.
 - c. Please feel free to contact us anytime.

West Michigan CDL
3370 Busch Dr SW Ste A
Grandville, MI 49418
P 616-257-9045
T 888-550-4947
F 616-257-9046



COSIGNER CREDIT APPLICATION

COSIGNER FOR: _____

West Michigan CDL

SCHOOL FINANCIAL AID REPREP. APPLICATION DATE RELATIONSHIP TO APPLICANT

APPLICANT'S FULL NAME (PLEASE PRINT) AGE SOCIAL SECURITY # SPOUSE'S NAME SPOUSE'S SOCIAL SEC #

PRESENT STREET ADDRESS (INCLUDE CITY/STATE/ZIP CODE) DATE OF BIRTH

TELEPHONE # MORT/RENT PAYMENT YEARS THERE DRIVER'S LIC. # STATE ISSUED

CURRENT EMPLOYER YEARS THERE EMPLOYER'S PHONE # SALARY

PREVIOUS EMPLOYER YEARS THERE EMPLOYER'S PHONE # SALARY

SPOUSE'S EMPLOYER SPOUSE'S EMPLOYER'S PHONE # SALARY YEARS EMPLOYED

BANKING INSTITUTION CHECKING ACCOUNT # SAVINGS ACCOUNT #

NAME OF TWO (2) CREDIT REFERENCES TELEPHONE # (UTILITIES, LANDLORD, PRIVATE LENDERS)

1.)

2.)

PROVIDE PERSONAL REFERENCES WITH HOME TELEPHONE AND AREA CODE ***THIS INFORMATION IS REQUIRED AND VERIFIED***

1.)

2.)

3.)

4.)

THE UNDERSIGNED AUTHORIZES LENDER TO SECURE ALL ADDITIONAL INFORMATION NECESSARY IN REGARD TO THIS APPLICATION AND AGREES THAT IN THE EVENT ANY OF THE ABOVE REPRESENTATIONS PROVE TO BE FALSE IN ANY MATERIAL RESPECT THAT THIS APPLICATION BE DENIED. THE UNDERSIGNED ALSO UNDERSTANDS THAT COMPLETING AND SIGNING THIS APPLICATION GIVES LENDER THE RIGHT TO PULL CREDIT REPORTS, VERIFY CREDIT, AND CONTACT REFERENCES.

CREDIT APPLICANT'S SIGNATURE

DATE