

Lender's Single Interest (LSI) **Proposal Request/Application**

Financial Institution Name: _____
 Full Street Address: _____
 Contact: _____ Title: _____ Phone: _____ ext. _____

PORTFOLIO STATUS

	Number	Outstanding \$	Monthly volume \$	Maximum term	Average term	Maximum \$ amount
Auto direct	_____	_____	_____	_____	_____	_____
Auto indirect	_____	_____	_____	_____	_____	_____
Recreational vehicle	_____	_____	_____	_____	_____	_____
Boat/marine	_____	_____	_____	_____	_____	_____
Mobile home	_____	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____	_____

	Auto direct	Auto indirect	Recreational vehicle	Boat/marine	Mobile home	Other
Number of loans made last year	_____	_____	_____	_____	_____	_____
Number of loans made prior year	_____	_____	_____	_____	_____	_____
Number of repossessions YTD	_____	_____	_____	_____	_____	_____
Number of repos last year	_____	_____	_____	_____	_____	_____
Number of repos prior year	_____	_____	_____	_____	_____	_____
Number of unrecovered skips YTD	_____	_____	_____	_____	_____	_____
Number of skips last year	_____	_____	_____	_____	_____	_____
Number of skips prior year	_____	_____	_____	_____	_____	_____
Net charge-offs YTD (\$)	_____	_____	_____	_____	_____	_____
Charge-offs last year (\$)	_____	_____	_____	_____	_____	_____
Delinquency % (30 day)	_____	_____	_____	_____	_____	_____
Delinquency % last year	_____	_____	_____	_____	_____	_____

Collections Manager _____ Phone: _____ ext. _____

LOAN UNDERWRITING

Down payment: _____ % New auto: _____ % Used auto: _____ % Maximum debt/income ratio: _____ %
 Do you use a credit scoring system? Yes No If yes, what kind? _____
 Are dealers set up under full/partial recourse? Yes No Repurchase? Yes No

INSURANCE INFORMATION

Do you verify insurance coverage before a loan is granted? Yes No
 Do you follow-up on the insurance status of each loan? Yes No
 If yes, do you use an automated tracking service? Yes No Name of tracking service: _____
 Do you intend to continue follow-up/tracking of insurance? Yes No Do you use LSI or VSI/blanket to protect your auto loans? Yes No
 Agency: _____ Company: _____ Policy Date: _____
 Premium per: Auto direct: \$ _____ Auto indirect: \$ _____ Recreational vehicle: \$ _____ Boat/marine: \$ _____ Mobile home: \$ _____
 Deductible: \$ _____ Limits: \$ _____ Are skip losses covered? Yes No
 Canceled/non-renewed date: _____ Will coverage continue on portfolio? Yes No

Signing this application does not bind the applicant nor the Company/Underwriters to complete this insurance.
ALL OF THE INFORMATION PROVIDED IS ACCURATE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT THE POLICY, IF ISSUED, WILL BE BASED UPON THE INFORMATION PROVIDED HEREIN.

Authorized signature _____ Date _____
 Typed or printed name _____ Title _____

Please email this completed form to Misty Kemp at misty.kemp@usrisk.com.