



# CREDIT APPLICATION

DATE RECEIVED:

<b>PERSONAL INFO</b>	PLAYER#		REQUESTED CREDIT LIMIT:				
	NAME:	LAST	FIRST	MI	AKA:	CITIZENSHIP	
	RESIDENTIAL ADDRESS:	UNIT#	#YRS @ ADDRESS			OWN <input type="checkbox"/> RENT <input type="checkbox"/>	
	CITY:	STATE & COUNTRY:			ZIP CODE:		
	PHONE: ( )	CELL: ( )			MARRIED <input type="checkbox"/> SINGLE <input type="checkbox"/>		
<b>BUSINESS INFO</b>	D.O.B. / /	SSN#	MAIL TO: NONE <input type="checkbox"/> HOME <input type="checkbox"/> OTHER <input type="checkbox"/> BUSINESS <input type="checkbox"/>		CALL TO: NONE <input type="checkbox"/> HOME <input type="checkbox"/> CELL <input type="checkbox"/> BUSINESS <input type="checkbox"/>		
	EMPLOYER NAME:		BUSINESS OWNER YES <input type="checkbox"/> NO <input type="checkbox"/>	SOLE OWNER YES <input type="checkbox"/> NO <input type="checkbox"/>			
	POSITION:		TYPE OF BUSINESS				
	ADDRESS: UNIT#				# OF YEARS EMPLOYED		
	CITY:		STATE & COUNTRY:			ZIP CODE:	
<b>FINANCIAL INFO</b>	BUS TEL #: ( )		EXT #:		EMPLOYER TEL # ( )		
	INCOME:	EMPLOYMENT \$	INVESTMENT \$	PENSION/OTHER \$	SOURCE	TOTAL \$	
	ASSETS:	PROPERTY \$	INVESTMENTS \$	AUTO \$	OTHER \$	TOTAL \$	
	DEBTS:	MORTGAGE \$	LOANS \$	REVOLVING CREDIT \$	OTHER \$	TOTAL \$	
	NAME OF OTHER CASINOS: (CLUB CODES ONLY)			TOTAL CASINO DEBTS:			
<b>BANKING INFO</b>	BANK #1:		ABA #		BANK #2:		
	BRANCH NAME:		CHECKING ACCOUNT #		BRANCH NAME:		
	STREET ADDRESS:		PERSONAL ACCOUNT: <input type="checkbox"/> SOLE PROP BUSINESS: <input type="checkbox"/> CSA: <input type="checkbox"/> Y <input type="checkbox"/> N		STREET ADDRESS:		
	CITY:		STATE & COUNTRY:		ZIP CODE		
	TELEPHONE #		CONTACT		TELEPHONE #		
<b>I.D. VERIFICATION</b>	PHOTO IDENTIFICATION	TYPE:	REF #	STATE & COUNTRY ISSUED		ISSUE DATE	
	OTHER IDENTIFICATION	TYPE:	REF #	STATE & COUNTRY ISSUED		ISSUE DATE	
	PHYSICAL DESCRIPTION: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		HEIGHT:	WEIGHT:	HAIR COLOR:	EYE COLOR:	ENGLISH? YES <input type="checkbox"/> NO <input type="checkbox"/>
	MMN:		ID VERIFICATION DATE:	I.D. BY:		VERIFIED BY:	
	RELATED PLAYER ACCT #		<p>"I certify that I have reviewed all of the information provided above and that it is true and accurate. I authorize the FireKeepers Development Authority to conduct such investigations pertaining to the above information, as it deems necessary for the approval of my credit limit. I am aware that this application is required to be prepared by the regulations of the FireKeepers Development Authority and I may be subject to civil or criminal liability if any material information provided by me is willfully false." I undertake to advise the FireKeepers Development Authority if any of the information on this application changes. I hereby authorize the Firekeepers Development Authority in its sole discretion to apply any and all gaming chips I may redeem first to the reduction of any outstanding credit balance, with the remainder if any to be returned to me. Failure to do so may result in immediate deposit of outstanding items and suspension of credit privileges.</p>				
NOTES:							
GAMES: TABLES <input type="checkbox"/> TYPE SLOTS <input type="checkbox"/>		_____ PATRON SIGNATURE (as on checks)					
MAIL IN <input type="checkbox"/> FAX <input type="checkbox"/> WALK IN <input type="checkbox"/> PHONE <input type="checkbox"/>							
RECEIVED RULES OF CREDIT YES <input type="checkbox"/> NO <input type="checkbox"/>							