Flight Training Finance Application

Ace Pilot Training

Allentown, Pennsylvania Lehigh Valley International Airport 610-264-1105



Pilot Finance, Inc. 2101 Waukegan Road, Suite 101 Bannockburn, Illinois 60015-1836 800-667-0201 • Fax: 847-267-1800

For the fastest service, FAX this completed application to us. FAX: 847-267-1800

Please tell us about y	ourself				
Name:		Date of Birth:	Social Security N	No:	
Address:		City, State, Zip:			
Home Phone:		☐ Own ☐ Rent	Years There: Mo	onthly Payment: \$	
Previous Address:		City, State, Zip:			
Reason for Move:		☐ Owned ☐ Rent	ed Years There: Mo	onthly Payment: \$	
Employer:		Address:			
City, State, Zip:			Ві	usiness Phone:	
Position:		Years There:	A	nnual Salary: \$	
Previous Employer:		Address:			
City, State, Zip:			Ві	usiness Phone:	
Previous Position:		Years There:	A	nnual Salary: \$	
Your Credit and Perso	onal References				
Credit Reference:		Account No.:	Ba	alance Owing:	
Credit Reference:		Account No.:	Ва	Balance Owing:	
Personal Reference:		Address: City, State, Zip:		Phone:	
Nearest relative not living with you:		Address: City, State, Zip:		Phone:	
Your Flight Training t	o be Financed				
Your Current Flight Experience		Certificate Held:		Total Hours:	
Your Anticipated Achievement	t with this Training:	Certificate:	Rating:		
Estimated Training Cost (if kn	own): \$	Preferred Cash 1	Down Payment: \$250	(Std)	
Please choose the training	ng and finance packag	e that best suits your	needs:		
☐ 1 Lesson Per Week / 72 F	Payments 3 Le	ssons Per Week / 48 Payme	ents 5 Lesso	ons Per Week / 18 Payme	ents
2 Lessons Per Week / 60	Payments	ssons Per Week / 30 Payme	ents		
Please see	the reverse side t	or optional informa	tion you would like	us to consider!	
	to investigate any facts an	d to obtain and exchange rep	nis application is correct and coorts and information regardi Upon request I will be inform	ing this application and/or	r resulting
Be sure to sign here					
	Applicant (signature)	Date	Co-Borrower (si	ignature)	Date

Optional: Co-Borrower or Guarant	or Information			
Name:	Date of Birth:	Social Sec	urity No:	
Your Relationship to the Flight Student:				
Address:	City, State, Zip:			
Home Phone:	☐ Own ☐ Rer	t Years There:	Monthly Payment: \$	
Previous Address:	City, State, Zip:			
Reason for Move:	☐ Owned ☐ Ren	nted Years There:	Monthly Payment: \$	
Employer:	Address:	740 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 -		
City, State, Zip:			Business Phone:	
Position:	Years There:		Annual Salary: \$	
Previous Employer:	Address:			
City, State, Zip:			Business Phone:	
Previous Position:	Years There:		Annual Salary: \$	
For example, if you think there may be not have experienced in the past, it may be he you have corrected them. Or, if you antic on the amount and certainty of the chang You may also use this space to tell us about alimony, child support, or separate maint as a basis for repaying your obligation to	elpful for us to have your c ipate a significant salary in e. at regular income you rece enance income need not b	omments on the cacrease in the near ive other than your or revealed if you on	use of the past problems are future, you may want to constant salary. Please note that do not wish to have it cons	nd how mment
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