



# Loan Gap Application

## Lender/Dealer Information

Named Insured: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## General Information

Number of loans to be made in the next 12 months: New \_\_\_\_\_ Used \_\_\_\_\_

Collateral type distribution: Autos/Trucks \_\_\_\_\_% Motorcycles \_\_\_\_\_% Watercraft \_\_\_\_\_% RV's \_\_\_\_\_%

Anticipated GAP Sales next 12 months (loans): New \_\_\_\_\_ Used \_\_\_\_\_

Credit Quality – What percentage of your sales/lending base falls into these interest rate categories:

Below 8% \_\_\_\_\_ 8%-12% \_\_\_\_\_ 12.1%-15% \_\_\_\_\_ 15.1%-17% \_\_\_\_\_ Over 17% \_\_\_\_\_

Is a "Purchase Discount", "Dealer Discount" or any other non-refundable discount or reverse funded from loans to offset deficiencies? Yes \_\_\_\_\_  
No \_\_\_\_\_ If Yes, is reserve payable or refundable to dealer or borrower upon loan payoff?

Please elaborate \_\_\_\_\_

Loan/Lease Information	New		Used	
	Average	Range	Average	Range
Percentage of transactions where advance exceeds 120% of MSRP or NADA Retail Book:				
Average original loan amount as a % of value (MSRP / NADA Retail Book):				
Average and range of original loan amounts (including add ons):	Average	Range -	Average	Range -
Average and range of loan terms at origination:	Average	Range -	Average	Range -
Average and range of interest rates:	Average	Range -	Average	Range -

Which of these are included in the original loan amount? Sales Tax Warranty (VSC/MBI)  
Other (Please indicate) \_\_\_\_\_

Do you, or did you previously, have a GAP program? Yes No  
If yes, please provide Rate, Lending to Value Limit and attach Experience information.

Was the GAP program cancelled by provider? Yes No If yes, reason \_\_\_\_\_

Do you specialize in any particular type of vehicle, (i.e. high performance, luxury, etc.)? Yes No  
If yes, elaborate \_\_\_\_\_

List approximate % of your loan originations by state:  
\_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_%

Percentage of clientele in military \_\_\_\_\_%

Capability to submit GAP business electronically? Yes No

Signature of Applicant/Named Insured: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Agent/Broker: \_\_\_\_\_ Date \_\_\_\_\_