



3333 Blue Diamond Road Phone: 702-914-8621
 Las Vegas, NV 89139 Fax: 702-893-7401

Casino Credit Application

Thank you for your interest in Silverton Casino. Upon completion please fax or mail the application to the number or address provided. Feel free to contact us if you need any assistance with your application.

We cannot process an incomplete or an unsigned application.

\$ _____
 Credit Limit Requested (Required)

_____/_____/_____
 Arrival Date

PERSONAL INFORMATION			
Last Name	First Name	MI	Date of Birth
Residential Street Address (No PO Boxes)		City	State Zip <input type="checkbox"/> Own <input type="checkbox"/> Rent
Identification Information (State & Number)		Social Security Number	Phone-Residence Phone-Cell
E-Mail Address		Mail To <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> None	
EMPLOYMENT INFORMATION			
Firm Name		Type of Business	
Position		Years @	Phone-Business
Business Street Address		City	State Zip
BANK INFORMATION			
Bank #1: (Name and Branch)		ABA/Routing Number	<input type="checkbox"/> Personal <input type="checkbox"/> Business
Bank Contact Name		Account Number	
Street Address		City	State Zip
Bank #2: (Name and Branch)		ABA/Routing Number	<input type="checkbox"/> Personal <input type="checkbox"/> Business
Bank Contact Name		Account Number	
Street Address		City	State Zip

I agree to pay my markers in full before 30 days or they will be deposited to my checking account on the 31st day after they were written.

I declare that the information set forth in the application is true and correct to the best of my knowledge. I give Silverton Casino, LLC or its representatives permission to obtain and verify credit information with any source (including banks I have listed or for any account from which I may in the future have the right to withdraw funds, regardless of whether that account now exists or whether I provided the information on the account to the payee) to obtain credit, and/or employment history, and exchange information with others about my credit and account experience with Silverton Casino, LLC. I will not hold these firms responsible for any information released. Silverton Casino, LLC may use any information obtained to evaluate my application or status and to aid in the collections of my account. With respect to the collection of my accounts, I (1) acknowledge that the debt shall be governed by Nevada law; (2) agree that any dispute involving the debt may be brought only in state or federal court in Nevada; (3) submit to the jurisdiction of any state or federal court in Nevada, and agree to pay all costs of collection, including the creditor's attorney's fees and court costs, in addition to any amounts authorized by law.

Signature	Date
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