

## CREDIT APPLICATION

**IMPORTANT APPLICANT INFORMATION:** Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

<b>TYPE OF CREDIT REQUESTED</b> <b>IMPORTANT: Check the appropriate boxes below and complete the applicable sections.</b> <input type="checkbox"/> <b>SECURED</b> <input type="checkbox"/> <b>INDIVIDUAL CREDIT</b> —relying solely on my income or assets <input type="checkbox"/> <b>UNSECURED</b> <input type="checkbox"/> <b>INDIVIDUAL CREDIT</b> —relying on my income or assets as well as income or assets from other sources <input type="checkbox"/> <b>JOINT CREDIT</b> — We intend to apply for joint credit. (initials) _____				<b>FOR CREDITOR USE</b> Date _____ Class No. _____ ACCOUNT NO. _____ APPROVED <input type="checkbox"/> BY _____ DECLINED <input type="checkbox"/> BY _____		
AMOUNT REQUESTED \$	FOR HOW LONG _____ months	PAYMENT DATE DESIRED _____	WANT TO REPAY <input type="checkbox"/> MONTHLY <input type="checkbox"/> _____	PROCEEDS OF LOAN TO BE USED FOR:		
<b>SECTION A—INDIVIDUAL APPLICANT INFORMATION</b>						
NAME (Last, First, Middle)						
BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDANTS	
ADDRESS (Street, City, State & Zip)				COUNTY	DO YOU <input type="checkbox"/> OWN or <input type="checkbox"/> RENT?	HOW LONG
PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than 3 years at previous address)				COUNTY	DID YOU <input type="checkbox"/> OWN or <input type="checkbox"/> RENT?	HOW LONG
EMPLOYER (Company Name & Address)					HOW LONG	
BUSINESS PHONE	Ext.	POSITION OR TITLE		SALARY PER MONTH		
PREVIOUS EMPLOYER (Company Name & Address)				GROSS \$	NET \$	
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU					RELATIONSHIP	TELEPHONE NO. (Include Area Code)
<b>Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.</b>						
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding						
SOURCES OF OTHER INCOME				AMOUNT PER MONTH		
Is any income listed in this Section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain)				Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes—When?		
<b>SECTION B—JOINT APPLICATION OR OTHER PARTY INFORMATION</b>						
Complete only if: for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property state.						
NAME (Last, First, Middle)						
BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDANTS	
RELATION TO APPLICANT (If Any)		PRESENT ADDRESS (Street, City, State & Zip)				HOW LONG
EMPLOYER (Company Name & Address)					HOW LONG	
BUSINESS PHONE	Ext.	POSITION OR TITLE		SALARY PER MONTH		
PREVIOUS EMPLOYER (Company Name & Address)				GROSS \$	NET \$	
PREVIOUS EMPLOYER (Company Name & Address)					HOW LONG	
<b>Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.</b>						
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding						
SOURCES OF OTHER INCOME				AMOUNT PER MONTH		
Is any income listed in this section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain)				Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes—When?		
<b>SECTION C—MARITAL STATUS</b>						
Complete only if application is for joint or secured credit, or applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested.						
APPLICANT	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced, and widowed)			
OTHER PARTY	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced, and widowed)			

**SECTION D—ASSETS AND DEBT INFORMATION**

If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Person.  
Please mark Applicant-related with an "A". If Section B was not completed, only give information about the Applicant in this Section.

<b>ASSETS OWNED</b> (Use separate sheet if necessary.)			
DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT	VALUE
CHECKING ACCOUNT NUMBER(s) (where)			\$
SAVINGS ACCOUNT NUMBER(s) / CERTIFICATE(s) OF DEPOSIT (where)			
CERTIFICATE(s) OF DEPOSITS / SAVINGS ACCOUNT NUMBER(s) (where)			
401-K(s) / IRA(s) (where)			
REAL ESTATE (location, date acquired)			
AUTOMOBILE(s) (make, model, year)			
AUTOMOBILE(s) (make, model, year)			
AUTOMOBILE(s) (make, model, year)			
OTHER (list)			
TOTAL ASSETS			\$

<b>OUTSTANDING DEBTS</b> (Including charge accounts, installment contracts, credit cards, rent, mortgages, and other obligations. Use separate sheet if necessary.)					
CREDITOR	ACCOUNT NUMBER	THE NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment		(OMIT RENT)	(OMIT RENT)	
	<input type="checkbox"/> Mortgage		\$	\$	\$
AUTOMOBILE(s) (describe)					
OTHER (list)					
TOTAL DEBTS			\$	\$	\$

**Complete the following information about both the Applicant and Joint Applicant or Other Person (if applicable):**

Are you obligated to make Alimony, Support or Maintenance Payments?  No  Yes  
 If yes, to (Name & Address) \_\_\_\_\_ Amnt / month \$ \_\_\_\_\_  
 Are you a co-maker, endorser, or guarantor on any loan or contract?  No  Yes If yes, for whom? \_\_\_\_\_ To whom? \_\_\_\_\_  
 Are there any unsatisfied judgments against you?  No  Yes If yes, to whom owed? \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 Have you been declared bankrupt in the last 10 years?  No  Yes If yes, where? \_\_\_\_\_ Year? \_\_\_\_\_

**SECTION E—SECURED CREDIT**

Complete only if credit is to be secured. Briefly describe the property to be given as a security:

PROPERTY DESCRIPTION

**SIGNATURES**

I certify that everything I have stated in this application and on any attachment is correct. Lender may keep this application whether or not it is approved. By signing below I authorize Lender to check my credit and employment history and to answer questions others may ask lender about my credit record with Lender. I understand that I must update credit information at Lender's request if my financial condition changes.

\_\_\_\_\_  
 Applicant's Signature Date Other Signature (where applicable) Date