

CREDIT APPLICATION

***** SAMPLE *****

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.

<p>Please select correct box for each. TYPE OF CREDIT REQUESTED</p> <p align="center">IMPORTANT: Check (X) the appropriate boxes below and complete the applicable sections.</p> <p><input type="checkbox"/> SECURED <input type="checkbox"/> INDIVIDUAL CREDIT - relying solely on my income or assets</p> <p><input type="checkbox"/> UNSECURED <input type="checkbox"/> INDIVIDUAL CREDIT - relying on my income or assets as well as income or assets from other sources</p> <p><input type="checkbox"/> JOINT CREDIT - We intend to apply for joint credit. (initials) _____.</p>	<p>FOR CREDITOR USE</p> <p>DATE _____ CLASS NO. _____</p> <p>ACCOUNT NO. _____</p> <p>APPROVED <input type="checkbox"/> BY _____</p> <p>DECLINED <input type="checkbox"/> BY _____</p>
---	---

AMOUNT REQUESTED \$ Total amount you want to borrow	FOR HOW LONG How long do you want to borrow?	PAYMENT DATE DESIRED What day of the month do you want payment	WANT TO REPAY <input type="checkbox"/> MONTHLY <input type="checkbox"/>	PROCEEDS OF LOAN TO BE USED FOR: Please list what you're looking to use funds for.
---	--	--	---	--

SECTION A - INDIVIDUAL APPLICANT INFORMATION

NAME (Last, First, Middle)					
BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS
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 present address)			County	Do you <input type="checkbox"/> own or <input type="checkbox"/> rent?	HOW LONG?
EMPLOYER (Company Name & Address)					HOW LONG?
BUSINESS PHONE Ext.	POSITION OR TITLE		GROSS:\$	SALARY PER MONTH NET:\$	
PREVIOUS EMPLOYER (Company Name & Address)					HOW LONG?
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE NO. (Include Area Code)		
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. 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?	

Only if you have 2 people applying. **SECTION B - JOINT APPLICANT OR OTHER PARTY INFORMATION**
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 DEPENDENTS
RELATIONSHIP TO APPLICANT (if any)		PRESENT ADDRESS (Street, City, State & Zip)			HOW LONG?
EMPLOYER (Company Name & Address)					HOW LONG?
BUSINESS PHONE Ext.	POSITION OR TITLE		GROSS:\$	SALARY PER MONTH NET:\$	
PREVIOUS EMPLOYER (Company Name & Address)					HOW LONG?
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. 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)				Has Joint Applicant or Other Party ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?	

SECTION C - MARITAL STATUS

Complete only if: 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)	Initials for one or both applicants.
OTHER PARTY	<input type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> UNMARRIED (INCLUDING SINGLE, DIVORCED, AND WIDOWED)	

SECTION D – ASSET & 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 information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

ASSETS OWNED (Use separate sheet if necessary)

DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT	VALUE
CHECKING ACCOUNT NUMBER(S) (WHERE)	Who all owns this asset? Please list all names.	Is this asset used as	\$
SAVINGS ACCOUNT NUMBER(S) (WHERE)	Who all owns this asset? Please list all names.	collateral for any loan?	
CERTIFICATE OF DEPOSIT(S) (WHERE)			
MARKETABLE SECURITIES (ISSUER, TYPE, NO. OF SHARES)			
REAL ESTATE (LOCATION, DATE ACQUIRED)			
LIFE INSURANCE (ISSUER, FACE VALUE)			
AUTOMOBILES (MAKE, MODEL, YEAR)			
OTHER (LIST)			
TOTAL ASSETS			\$

OUTSTANDING DEBTS (Including charge accounts, installment contracts, credit cards, rent, mortgages and other obligations. Use separate sheet if necessary.)

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage	Who all is responsible for this debt?	\$ (OMIT RENT)	\$ (OMIT RENT)	\$
AUTOMOBILES (describe)					
Please include all installment loans, student loans, credit cards, etc.					
TOTAL DEBTS			\$	\$	\$

Please answer all. 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) _____ Amt. per 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 security:

PROPERTY DESCRIPTION _____

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY _____

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (if any). _____

SIGNATURES I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved.

By signing below I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Please sign and date when returning to the Bank.

Applicant's Signature

Date

Other Signature (Where Applicable)

Date