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.

TYPE OF CREDIT REQUESTED

IMPORTANT: Check (√) the appropriate boxes below and complete the applicable sections.

☐ SECURED ☐ INDIVIDUAL CREDIT - relying solely on my income or assets

☐ UNSECURED ☐ INDIVIDUAL CREDIT - relying on my income or assets as well as income or assets from other sources.

☐ JOINT CREDIT - We intend to apply for joint credit. (initials) _____

FOR CREDITOR USE

DATE _____ CLASS NO. _____

ACCOUNT NO. _____

APPROVED ☐ BY _____

DECLINED ☐ BY _____

AMOUNT REQUESTED	FOR HOW LONG	PAYMENT DATE DESIRED	WANT TO REPAY	PROCEEDS OF LOAN TO BE USED FOR:
$			☐ MONTHLY ☐	

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 ☐ own or ☐ rent?	HOW LONG
PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than 3 years at present address)	COUNTY	Did you ☐ own or ☐ rent?	HOW LONG

EMPLOYER (Company Name & Address)	HOW LONG

BUSINESS PHONE Ext.	POSITION OR TITLE	SALARY PER MONTH GROSS: $ NET: $

PREVIOUS EMPLOYER (Company Name & Address)	HOW LONG

NAME & 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: ☐ Court Order ☐ Written Agreement ☐ 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? ☐ No ☐ Yes (Explain)	Have you previously received credit from us? ☐ No ☐ Yes - When?

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	SALARY PER MONTH GROSS: $ 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: ☐ Court Order ☐ Written Agreement ☐ Oral Understanding

SOURCES OF OTHER INCOME	AMOUNT PER MONTH $

Is any income listed in this Section likely to be reduced before the credit requested is paid off? ☐ No ☐ Yes (Explain)	Has Joint Applicant or Other Party ever received credit from us? ☐ No ☐ 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	☐ Married	☐ Separated	☐ Unmarried (including single, divorced, and widowed)
OTHER PARTY	☐ Married	☐ Separated	☐ 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)			$
SAVINGS ACCOUNT NUMBER(S) (where)			
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 (Include 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	☐ Rent Payment ☐ Mortgage		(OMIT RENT) $	(OMIT RENT) $	$
AUTOMOBILES (describe)					
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) _____ 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. 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

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