

CONSUMER 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				
<input type="checkbox"/> SECURED		<input type="checkbox"/> INDIVIDUAL CREDIT - relying solely on my income or assets		
<input type="checkbox"/> UNSECURED		<input type="checkbox"/> INDIVIDUAL CREDIT - relying on my income or assets as well as income or assets from another		
		<input type="checkbox"/> JOINT CREDIT - We intend to apply for joing credit (Initials) _____		
AMOUNT REQUESTED	FOR HOW LONG	PAYMENT DATE DESIRED	WANT TO REPAY	PURPOSE
\$			<input type="checkbox"/> MONTHLY <input type="checkbox"/>	

SECTION A - INDIVIDUAL APPLICANT INFORMATION

NAME (Last, First, Middle)					
BIRTHDATE	PHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES
ADDRESS (Street, City, State & Zip)				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		SALARY PER MONTH (Gross) \$	
PREVIOUS EMPLOYER (Company Name & Address)					HOW LONG
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU				RELATIONSHIP	PHONE NO.
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, or 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	

SECTION B - JOINT APPLICANT OR OTHER PARTY INFORMATION

Complete only if: for joint credit or for individual credit relying on income or assets from other sources.

NAME (Last, First, Middle)					
BIRTHDATE	PHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES
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) \$	
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, or 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	

SECTION C - MARITAL STATUS

Applicant	<input type="checkbox"/> Married	<input type="checkbox"/> Seperated	<input type="checkbox"/> Unmarried
Other Party	<input type="checkbox"/> Married	<input type="checkbox"/> Seperated	<input type="checkbox"/> Unmarried

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

DESCRIPTION OF ASSETS	NAME IN WHICH ACCOUNT IS CARRIED	SUBJECT TO DEBT?	VALUE
CHECKING ACCOUNT NUMBER(S) (where)			
SAVINGS ACCOUNT NUMBER(S) (where)			
CERTIFICATE OF DEPOSIT(S) (where)			
LIFE INSURANCE (issuer, face value)			
AUTOMOBILES (make, model, year, miles)			
OTHER			

OUTSTANDING DEBTS (Including charge accounts, installment contracts, credit cards, rent, mortgages and other obligations.)

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
LANDLORD OR MTG HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage				
AUTOMOBILES (describe)					

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) _____ Amount 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 judgements 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 _____

SIGNATURES

The undersigned hereby declare and represent that they have read the foregoing Application, that all statements made therein are complete and true to their knowledge, that all financial and credit information of value to the consideration of this Credit Request has been given and that the statements are made and information given as an inducement to the Lender to grant the Credit for which this Application is made. The Applicant(s) authorize the Lender, or his Agent, to verify the information contained herein and to make such additional normal inquiries as reasonably may be related to or associated with this Application, from credit bureaus and from employers, creditors, and references listed on this Application, and agree that such information, along with this Application, shall remain the Lender's property. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature _____ Date _____ Other Signature (Where Applicable) _____ Date _____

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I HAVE APPLIED FOR AN EXTENSION OF CREDIT WITH YOU. IF YOU ARE SOLICITING, OFFERING OR SELLING ME AN INSURANCE PRODUCT OR ANNUITY IN CONNECTION WITH THIS EXTENSION OF CREDIT, **FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:**

- MY PURCHASE OF AN INSURANCE PRODUCT OR ANNUITY FROM YOU OR FROM ANY OF YOUR AFFILIATES; OR
- MY AGREEMENT NOT TO OBTAIN, OR A PROHIBITION ON ME FROM OBTAINING, AN INSURANCE PRODUCT OR ANNUITY FROM AN UNAFFILIATED ENTITY.

BY SIGNING, I ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THIS FORM ON TODAY'S DATE UNLESS THIS DISCLOSURE PROVIDED ELECTRONICALLY OR I HAVE APPLIED FOR CREDIT BY MAIL, I ALSO ACKNOWLEDGE THAT YOU HAVE PROVIDED THIS DISCLOSURE TO ME ORALLY.

BORROWER

BORROWER

DATE