

# Credit Application

**Important Information to Applicant(s).** To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who applies for a loan or opens an account. **What this means for you.** When you apply for a loan or open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. 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. **Read each instruction carefully before completing this form.**

**Creditor**

("You" means Applicant, *et al*; and "We" means Creditor)

**For Creditor Use**

Account No.	Class No.	Date Received
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**1. Type of Application**

Check only one of the three types:

- Individual Credit** - You are relying solely on your income or assets.
- Individual Credit** - You are relying on your income or assets as well as income or assets from other sources.

**Joint Credit** - By initialing below, you intend to apply for "joint credit".

Applicant \_\_\_\_\_ Joint Applicant \_\_\_\_\_

**2. Type of Requested Credit**

Application Date	Amount \$	Financing Type <input type="checkbox"/> New <input type="checkbox"/> Refinance <input type="checkbox"/> Modification	No. of Months	Repayment Interval <input type="checkbox"/> Monthly <input type="checkbox"/>	First Payment Date
Credit Type <input type="checkbox"/> Line of Credit <input type="checkbox"/> Loan <input type="checkbox"/> Sale <input type="checkbox"/> Lease	Loan Purpose <input type="checkbox"/> Agricultural <input type="checkbox"/> Business <input type="checkbox"/> Consumer	Security for Credit <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured	Proceeds of Credit to Be Used for <input type="checkbox"/> To purchase property that will secure your credit <input type="checkbox"/> To purchase property that is a residential dwelling and is not real estate <input type="checkbox"/> To finance home improvements to a residential dwelling <input type="checkbox"/> Other ( <i>describe</i> ):		

**Applicant**

**3. Applicant Information**

**Joint Applicant or Other Party**

Full Name ( <i>First, Middle, Last</i> )			Full Name ( <i>First, Middle, Last</i> )		
Gov't ID Type	Gov't ID No.	Gov't ID Issued By	Gov't ID Type	Gov't ID No.	Gov't ID Issued By
Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth	Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth
Soc. Sec. No.	Primary Phone <input type="checkbox"/> Cell	Second Phone <input type="checkbox"/> Cell	Soc. Sec. No.	Primary Phone <input type="checkbox"/> Cell	Second Phone <input type="checkbox"/> Cell
Email Address:			Email Address:		
Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:			Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:		
Previous Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:			Previous Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:		
Dependents No.: Ages:			Dependents No.: Ages:		
Nearest Relative ( <i>not living with you</i> ) Name: Address:  Telephone: <input type="checkbox"/> Cell			Nearest Relative ( <i>not living with you</i> ) Name: Address:  Telephone: <input type="checkbox"/> Cell		
Your Relationship to us (or our affiliate) <input type="checkbox"/> None <input type="checkbox"/> Employee <input type="checkbox"/> Insider (Shareholder, Director, Officer)			Your Relationship to us (or our affiliate) <input type="checkbox"/> None <input type="checkbox"/> Employee <input type="checkbox"/> Insider (Shareholder, Director, Officer)		
Have you ever received credit from us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when: office/branch:			Have you ever received credit from us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when: office/branch:		



<i>Applicant</i>	<b>5. Employment Information</b>	<i>Joint Applicant or Other Party</i>
<b>1st Employer:</b> <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address:  Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:		<b>1st Employer:</b> <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address:  Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:
<b>2nd Employer:</b> <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address:  Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:		<b>2nd Employer:</b> <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address:  Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:
<b>3rd Employer:</b> <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address:  Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:		<b>3rd Employer:</b> <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address:  Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:

<i>Applicant</i>	<b>6. Other Income</b>	<i>Joint Applicant or Other Party</i>
<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		<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
<b>Other Income:</b> \$ _____ per Month Source:		<b>Other Income:</b> \$ _____ per Month Source:
<b>Is any income listed in Sections 4, 5 or 6 likely to be reduced before the credit is paid off:</b> <input type="checkbox"/> Yes (Explain in section 10.) <input type="checkbox"/> No		<b>Is any income listed in Sections 4, 5 or 6 likely to be reduced before the credit is paid off:</b> <input type="checkbox"/> Yes (Explain in section 10.) <input type="checkbox"/> No

<i>Applicant</i>	<b>7. Other Obligations</b>	<i>Joint Applicant or Other Party</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount: \$ For whom: To whom:	Are you a co-maker, endorser, co-signer, surety, or guarantor on any loan, contract or other obligation?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount: \$ For whom: To whom:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:	Are there any unsatisfied judgments against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Where: Year:	Have you been declared bankrupt in the last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Where: Year:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:	Are you obligated to make Alimony, Support or Maintenance Payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:

<b>8. Property Information (if secured)</b>		
<b>Property Type</b> <input type="checkbox"/> Boat or Vessel <input type="checkbox"/> Certificate of Deposit <input type="checkbox"/> Deposit Account <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Motor Vehicle <input type="checkbox"/>	<b>Property Description</b>  <input type="checkbox"/> Residential Dwelling <input type="checkbox"/> Homestead Property	<b>Property Location and Address</b>
<b>Primary Use of Property</b> <input type="checkbox"/> Agricultural <input type="checkbox"/> Business <input type="checkbox"/> Consumer	<b>Property Owner(s) Names &amp; Addresses</b>	

