

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 opens an account.

What this means for you: When you 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 information.

Amount Requested: \$ _____	Loan Purpose: _____
Term Requested (In Months): _____	<input type="checkbox"/> Secured <input type="checkbox"/> Ready Reserve <input type="checkbox"/> Unsecured

**APPLICANT INFORMATION**

APPLICANT		JOINT APPLICANT	
<b>Name:</b> _____		<b>Name:</b> _____	
<b>Present Address:</b> # Years: _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent Street: _____ City: _____ State: _____ Zip Code: _____ <b>Former Address (If less than 2 years at present address)</b> Street: _____ City: _____ State: _____ Zip Code: _____ Years at former address: _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent		<b>Present Address:</b> # Years: _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent Street: _____ City: _____ State: _____ Zip Code: _____ <b>Former Address (If less than 2 years at present address)</b> Street: _____ City: _____ State: _____ Zip Code: _____ Years at former address: _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent	
Drivers License #: _____ Expiration Date: _____		Drivers License #: _____ Expiration Date: _____	
Social Security #: _____		Social Security #: _____	
<b>HOME PHONE #:</b> _____		<b>HOME PHONE #:</b> _____	
<u>Marital Status</u> (Do not complete if this is an application for individual unsecured credit): <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, divorced, widowed)		<u>Marital Status</u> (Do not complete if this is an application for individual unsecured credit): <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, divorced, widowed)	
Dependents other than listed by joint applicant # of dependents: _____ Ages: _____		Dependents other than listed by joint applicant # of dependents: _____ Ages: _____	
<b>Name / Address of Employer:</b> _____ <small>(Do not complete if this is an application for individual unsecured credit)</small>		<b>Name / Address of Employer:</b> _____ <small>(Do not complete if this is an application for individual unsecured credit)</small>	
Years employed in this line of work/profession: _____ Years on this job: _____ Self Employed: _____		Years employed in this line of work/profession: _____ Years on this job: _____ Self Employed: _____	
Position/Title: _____		Position/Title: _____	
<b>WORK PHONE #:</b> _____		<b>WORK PHONE #:</b> _____	
A=Applicant    J=Joint Applicant		If Employed in current position for less than 2 years, complete the following ↓	
A (or) J	Previous employer	City/State	Type of business
			Position/Title
			Dates From / To
			Monthly income:
			\$
			\$

**INCOME & COLLATERAL**

GROSS MONTHLY INCOME				COLLATERAL INFORMATION	
Item:	Applicant:	Joint Applicant:	TOTAL:	Description:	
Base W-2 Income	\$	\$	\$		
Overtime	\$	\$	\$		
Bonuses	\$	\$	\$		
Commissions	\$	\$	\$		
Dividends/Interest	\$	\$	\$		
Net Rental Income	\$	\$	\$		
Retirement Disability	\$	\$	\$		
Other (See below)*	\$	\$	\$	Insurance agent & company: _____ Policy #: _____	
<b>TOTAL:</b>	\$	\$	\$	List the names and addresses of all co-owners of the property: _____	
*Describe Other Income below (NOTE: Alimony, child support or separate maintenance income need not be revealed if the Applicant or Joint Applicant does not choose to have it considered as a basis for repaying this loan.)					
Applicant				Amount: \$	
Joint Applicant				Amount: \$	

## STATEMENT OF ASSETS & LIABILITIES

ASSETS		LIABILITIES & PLEDGED ASSETS			
Indicate by (*) those liabilities or pledged assets which will be satisfied upon completion of this loan.					
<b>Checking &amp; Savings Accounts (Show name of Institution &amp; Acct #)</b>	<b>Cash or Market value</b>	Creditors Name, Address and Account Number	Acct. Name if not applicant	Monthly Payments / # Months remaining	Unpaid Balance
		Company:			
		Company:			
		Company:			
<b>Stocks and Bonds (#/Description)</b>		Alimony owed:			
<b>Life Ins. Net Cash Value Face Amount: \$</b>		Child support owed:			
<b>SUBTOTAL LIQUID ASSETS:</b>	\$	Separate Maintenance owed:			
		LANDLORD / MORTGAGE HOLDER			
		Company: _____ Acct.# _____			
		Address: _____			
<b>Real Estate owned</b>		REAL ESTATE LOAN			
Primary Residence	\$	Company: _____ Acct.# _____			
2 <sup>nd</sup> Home	\$	Address: _____			
Rental Property	\$	Automobile Loan: _____ Acct.# _____			
Other:	\$	Company: _____			
<b>Vested Interest in retirement fund</b>		Automobile Loan: _____ Acct.# _____			
		Company: _____			
<b>Automobiles owned</b>		OTHER DEBTS (including stock pledges)			
Year & Make	Current value	Annual Real Estate Taxes: \$ _____			
	\$				
	\$	Annual Homeowners Insurance: \$ _____			
	\$	Insurance Company: _____			
<b>Other Assets (Itemize)</b>		<b>TOTAL MONTHLY PAYMENTS:</b>		\$	
<b>TOTAL ASSETS:</b>	A \$	<b>NET WORTH (A MINUS B)</b>	\$	<b>TOTAL LIABILITIES</b>	B \$

### COVERED BORROWER IDENTIFICATION STATEMENT

<b>Warning: It is important to complete this statement accurately. Knowingly making a false statement on a credit application is a crime.</b>
<p>Federal law provides important protections to active duty members of the Armed Forces and their dependents. To ensure that these protections are provided to eligible applicants, we require you to attest to one of the following statements as applicable:</p> <p><input type="checkbox"/> I AM a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer.</p> <p><input type="checkbox"/> I AM a dependent of the Armed Forces on active duty as describe above, because I am the member's spouse, the member's child under the age of eighteen years old, or I am an individual for whom the member provided more than one-half of my financial support for 180 days immediately preceding today's date.</p> <p><input type="checkbox"/> I AM NOT a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer (or a dependent of such a member).</p> <p>Applicant Signature: _____</p>
<p>Federal law provides important protections to active duty members of the Armed Forces and their dependents. To ensure that these protections are provided to eligible applicants, we require you to attest to one of the following statements as applicable:</p> <p><input type="checkbox"/> I AM a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer.</p> <p><input type="checkbox"/> I AM a dependent of the Armed Forces on active duty as describe above, because I am the member's spouse, the member's child under the age of eighteen years old, or I am an individual for whom the member provided more than one-half of my financial support for 180 days immediately preceding today's date.</p> <p><input type="checkbox"/> I AM NOT a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer (or a dependent of such a member).</p> <p>Joint Applicant Signature: _____</p>

**THESE QUESTIONS APPLY TO BOTH THE APPLICANT AND JOINT APPLICANT**

If a "Yes" answer is given to a question in this column, please explain on an attached sheet.	APPLICANT	JT.APPLICANT		APPLICANT	JT.APPLICANT
	Yes or No	Yes or No		Yes or No	Yes or No
Are there any outstanding judgments against you?	_____	_____	Are you a United States Citizen?	_____	_____
Have you filed bankruptcy or had a bankruptcy petition filed against you?	_____	_____	If "No", are you a resident alien?	_____	_____
Have you had property foreclosed upon or given title or deed in lieu thereof in the past 7 years?	_____	_____	If "No" Are you a non-resident alien?	_____	_____
Are you obligated to pay alimony, child support or separate maintenance?	_____	_____	Are you a party to a lawsuit?	_____	_____
Are you a co-maker, endorser, or guarantor on any loan or contract?	_____	_____	Have you ever received credit from us?	_____	_____
			Explain Other Financing or Other Equity	_____	

PERSONAL REFERENCE(S)		
Applicant Name & Address of nearest relative not living with you:  Relationship:	Business Phone #:	Home Phone #:
Joint Applicant Name & Address of nearest relative not living with you:  Relationship:	Business Phone #:	Home Phone #:

INTENT TO APPLY FOR JOINT CREDIT
<p>If this is an application for joint credit, Applicant and Joint Applicant each agree that we intend to apply for joint credit (sign below):</p> <p>_____</p> <p align="center">Applicant <span style="margin-left: 200px;">Joint Applicant</span></p>

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 any 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.

Signature of Applicant	Date	Signature of Joint Applicant	Date
X		X	

**--TO BE COMPLETED BY BANKER--**

This application was taken:    By Face-to-Face interview \_\_\_\_\_    By Mail \_\_\_\_\_    By Telephone \_\_\_\_\_

By initialing below, Banker acknowledges that an oral disclosure of insurance was made to the applicant(s) and that applicant(s) acknowledged receipt of the disclosure:

DATE RECEIVED: \_\_\_\_\_                      BANKER: \_\_\_\_\_