



## CREDIT APPLICATION

**IMPORTANT APPLICANT INFORMATION:** Federal law requires financial institutions to obtain sufficient information to verify your identify. 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 CREDITORS USE

DATE \_\_\_\_\_ CLASS NO. \_\_\_\_\_

ACCOUNT NO. \_\_\_\_\_

APPROVED  BY \_\_\_\_\_

DECLINED  BY \_\_\_\_\_

AMOUNT REQUESTED	FOR HOW LONG	PAYMENT DATE DESIRED	WANT TO REPAY <input type="checkbox"/> MONTHLY <input type="checkbox"/>	PROCEEDS OF LOAN TO BE USED 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	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? <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?
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### 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? <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?
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### 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)
OTHER PARTY	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced, and widowed)

**ASSETS** (Attach additional page if needed)

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 given information about the Applicant in this Section.

CHECK ACCOUNT #'S	\$
SAVINGS ACCOUNT # and CERTIFICATES OF DEPOSIT	
OTHER ACCOUNTS (401(k), IRA, etc)	
REAL ESTATE (Address & Description)	
Residence	
Rentals and other real estate	
AUTOMOBILE (Year, Make and Model)	
OTHER ASSETS: (Mobile Homes, Motorcycles, Boats, Livestock, etc.)	

**LIABILITIES** (Attach additional page if needed)

**Real Estate, Vehicles, Credit Cards, etc.**

CREDITOR'S NAME	Orig. Loan Amount	Payment Amount	Unpaid Balance
	\$	\$	\$

**RE-CAP OF MONTHLY INCOME**

**RE-CAP OF MONTHLY EXPENSES**

\*Alimony, child support, and maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Salary or Wages		House Payment or Rent	
Rentals		Lot Rent	
Alimony, Child Support*		Alimony, Child Support	
Other Income		Other Payments	

Insurance Company \_\_\_\_\_ Agent's Name \_\_\_\_\_ Phone \_\_\_\_\_

**FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE**

I have applied for an extension of credit with you. 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:**

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. 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 is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

**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.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Cell #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_