

CONSUMER LOAN APPLICATION

Applicant				Joint Applicant				<input type="checkbox"/> Joint Credit	<input type="checkbox"/> Co-Signed	<input type="checkbox"/> Guaranty	
Last Name _____ First Name _____ MI _____				Last Name _____ First Name _____ MI _____							
Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <input type="checkbox"/> Unknown <input type="checkbox"/> Customer Since _____				Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <input type="checkbox"/> Unknown <input type="checkbox"/> Customer Since _____							
Present Street / PO Box _____ City / State _____ Zip _____ How Long _____				Present Street / PO Box _____ City / State _____ Zip _____ How Long _____							
Previous Street / PO Box _____ City / State _____ Zip _____ How Long _____				Previous Street / PO Box _____ City / State _____ Zip _____ How Long _____							
SSN _____ DOB _____ Drivers License _____ Phone # _____				SSN _____ DOB _____ Drivers License _____ Phone # _____							
Curr. Employer _____ Address _____ How long _____ Position _____				Curr. Employer _____ Address _____ How long _____ Position _____							
Gross Monthly Income _____ FT/PT _____ hours _____ Phone # _____				Gross Monthly Income _____ FT/PT _____ hours _____ Phone # _____							
Former Employer _____ Address _____ How long _____ Position _____				Former Employer _____ Address _____ How long _____ Positio _____							
Prev. Gross Inc. _____ Per (hr., week, etc.) _____ FT/PT _____ PT Hours _____				Prev. Gross Inc. _____ Per (hr., week, etc.) _____ FT/PT _____ PT Hours _____							
Alimony child support, or separate maintenance income need not be revealed if applicant does not wish to have it considered as a basis for repaying this obligation.											
Other Income (Monthly) _____ Source _____				Other Income (Monthly) _____ Source _____							
Nearest Relative Not Living with Applicant _____ Relationship _____				Nearest Relative Not Living with Applicant _____ Relationship _____							
Relative's Address _____ Telephone # _____				Relative's Address _____ Telephone # _____							
Creditor _____ Outstanding Debts _____ Pmt _____				Creditor _____ Outstanding Debts _____ Pmt _____							
Purpose Reason for Request _____				Collateral Offered Describe _____							
Amount Requested: _____											
We intend to apply for joint credit. By Initialing below we acknowledge the intention to apply for joint credit on todays date: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>											
Signatures - I certify that everything I have stated in this application and on any attachment 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 agree to update financial, credit or collateral information at Lender's request .											
Applicant's Signature _____ Date _____				Applicant's Signature _____ Date _____							
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											
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.											
Applicant's Signature _____ Date _____				Applicant's Signature _____ Date _____							
THE FOLLOWING SECTION IS ONLY TO BE COMPLETED IF THE LOAN BEING REQUESTED IS FOR CREDIT PRIMARILY FOR THE PURCHASE, REFINANCING OR IMPROVEMENT OF A DWELLING EVEN IF THE LOAN IS NOT SECURED BY THAT DWELLING.											
The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. Your are not required to furnish this information, but are encouraged to do so. the law provides that a lender may discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not which to furnish the information, please check the box below. (Lender must review the above material to assure the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)											
BORROWER <input type="checkbox"/> I do not wish to furnish this information.					CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information.						
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino					Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino						
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White					Race: <input type="checkbox"/> American Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American						
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male					Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male						
To be Completed by Interviewer This application was taken by: <input type="checkbox"/> Face-to-face Interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet				Interviewer's Name (print or type) _____				Name and Address of Interviewer's Employer _____			
				Interviewer's Signature _____							
				Interviewer's Phone Number (include area code) _____				Unique Identifier _____			