



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

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 CREDITOR 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:
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SECTION A - INDIVIDUAL APPLICANT INFORMATION

NAME (Last, First, Middle) _____

BIRTHDATE / /	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS
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ADDRESS (Street, City, State & Zip) _____ COUNTY _____
 Do you own or rent? HOW LONG _____

PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than 3 years at present address) _____ COUNTY _____
 Did you own or rent? HOW LONG _____

EMPLOYER (Company Name & Address) _____ HOW LONG _____

BUSINESS PHONE Ext.	POSITION OR TITLE	GROSS: \$	SALARY PER MONTH NET: \$
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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 \$
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Is any income listed in this Section likely to be reduced before the credit request is paid off?
 No Yes (Explain) _____

Have you previously received credit from us?
 No Yes - When? _____

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
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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	GROSS: \$	SALARY PER MONTH NET: \$
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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 \$
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Is any income listed in this Section likely to be reduced before the credit requested is paid off?
 No Yes (Explain) _____

Has Joint Applicant or Other Party ever received credit from us?
 No Yes - When? _____

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)

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 (Use separate sheet if necessary.)

DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT?	VALUE
CHECKING ACCOUNT NUMBER(S) (where)			\$
SAVINGS ACCOUNT NUMBER(S) (where)			
AUTOMOBILES (make, model, year)			
OTHER (list)			
TOTAL ASSETS			\$

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages and other obligations. Use separate sheet if necessary.)

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		(OMIT RENT) \$	(OMIT RENT) \$	\$
AUTOMOBILES (describe)					
TOTAL DEBTS			\$	\$	\$

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) _____ Amt. 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 judgments 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 _____

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 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.

My choice of an insurer or producer shall not affect your credit decision or credit terms in any way. However, you may impose reasonable requirements concerning the credit-worthiness of the insurer and the scope of the coverage chosen.

By signing below, 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 _____

Other Signature (Where Applicable) _____

Date _____