

## CREDIT APPLICATION

**IMPORTANT: Please read these directions before completing this Application, and check (✓) the appropriate box below.**

- If you are applying for individual credit in your own name, and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections A and D. If the requested credit is to be secured, also complete the first part of Section C and Section E.
- If you are applying for joint credit with another person, complete all Sections except E, providing information in B about the joint applicant. If the requested credit is to be secured, then complete Section E. WE INTEND TO APPLY FOR JOINT CREDIT: \_\_\_\_\_
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections except E to the extent possible, providing information in B about the person on whose alimony, support, or maintenance payments or income or assets you are relying. If the requested credit is to be secured, then complete Section E.

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR APPLYING FOR A LOAN OR OPENING A NEW ACCOUNT**

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act 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, we will ask for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required. The information you provide is protected by our privacy policy and federal law.

AMOUNT REQUESTED \$	PAYMENT DATE DESIRED	PROCEEDS OF CREDIT TO BE USED FOR
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**SECTION A - INFORMATION REGARDING APPLICANT**

FULL NAME (Last, First Middle)	BIRTH DATE	HOME PHONE	CELL PHONE	BUSINESS PHONE Ext.
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Are you a member of the armed forces who is serving on active duty or on active Guard or Reserve duty? <input type="checkbox"/> No <input type="checkbox"/> Yes	Are you a dependent of a member of the armed forces who is serving on active duty or on active Guard or Reserve duty? <input type="checkbox"/> No <input type="checkbox"/> Yes
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<b>ARE YOU A U.S. PERSON?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO (Complete all that apply)	DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	SOCIAL SECURITY NO. or TAX I.D NO.
	STATE ID CARD NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	MILITARY ID
	PASSPORT NO. & COUNTRY OF ISSUANCE:	INDIVIDUAL TAXPAYER ID NO.	NO TAXPAYER ID NO., BUT HAVE FILED APPLICATION FOR ONE. WHEN FILED:	GOVERNMENT ISSUED DOCUMENT NO. AND COUNTRY OF ISSUANCE:	OTHER (TRIBAL ID, ETC.)

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box, City, State, & Zip) or; IF MILITARY, APO OR FPO ADDRESS or; IF N/A, NEXT OF KIN OR FRIEND	HOW LONG AT PRESENT ADDRESS?
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PREVIOUS ADDRESS (Street, City, State, & Zip)	HOW LONG AT PREVIOUS ADDRESS?	EMAIL ADDRESS
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PRESENT EMPLOYER (Company Name & Address)	OCCUPATION	POSITION OR TITLE	HOW LONG WITH PRESENT EMPLOYER?	NAME OF SUPERVISOR
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PREVIOUS EMPLOYER (Company Name & Address)	HOW LONG WITH PREVIOUS EMPLOYER?
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YOUR PRESENT GROSS SALARY OR COMMISSION \$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER	NO. DEPENDENTS	AGES OF DEPENDENTS
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**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, or separate maintenance received under:  Court Order  Written Agreement  Oral Understanding

OTHER INCOME \$ PER	SOURCES OF OTHER INCOME	Have you ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?
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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)	Checking Acct. No. . . . . Where? . . . . . Savings Acct. No. . . . . Where? . . . . .
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NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	TELEPHONE NO. (Include Area Code)
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**SECTION B - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheets if necessary.)**

FULL NAME (Last, First, Middle)	RELATIONSHIP TO APPLICANT (If Any)	BIRTH DATE	HOME PHONE	CELL PHONE	BUSINESS PHONE Ext.
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Are you a member of the armed forces who is serving on active duty or on active Guard or Reserve duty? <input type="checkbox"/> No <input type="checkbox"/> Yes	Are you a dependent of a member of the armed forces who is serving on active duty or on active Guard or Reserve duty? <input type="checkbox"/> No <input type="checkbox"/> Yes
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<b>ARE YOU A U.S. PERSON?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO (Complete all that apply)	DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	SOCIAL SECURITY NO. or TAX I.D NO.
	STATE ID CARD NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	MILITARY ID
	PASSPORT NO. & COUNTRY OF ISSUANCE:	INDIVIDUAL TAXPAYER ID NO.	NO TAXPAYER ID NO., BUT HAVE FILED APPLICATION FOR ONE. WHEN FILED:	GOVERNMENT ISSUED DOCUMENT NO. AND COUNTRY OF ISSUANCE:	OTHER (TRIBAL ID, ETC.)

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box, City, State, & Zip) or; IF MILITARY, APO OR FPO ADDRESS or; IF N/A, NEXT OF KIN OR FRIEND	HOW LONG AT PRESENT ADDRESS?
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PRESENT EMPLOYER (Company Name & Address)	OCCUPATION	POSITION OR TITLE	HOW LONG WITH PRESENT EMPLOYER?	NAME OF SUPERVISOR
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PREVIOUS EMPLOYER (Company Name & Address)	HOW LONG WITH PREVIOUS EMPLOYER?
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YOUR PRESENT GROSS SALARY OR COMMISSION \$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER	NO. DEPENDENTS	AGES OF DEPENDENTS
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**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, or separate maintenance received under:  Court Order  Written Agreement  Oral Understanding

OTHER INCOME \$ PER	SOURCES OF OTHER INCOME	Has Joint Applicant or Other Party ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?
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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)	Checking Account No. . . . . Where? . . . . . Savings Account No. . . . . Where? . . . . .
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NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	TELEPHONE NO. (Include Area Code)
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**SECTION C - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)**

APPLICANT	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (Including single, divorced, or widowed)
OTHER PARTY	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (Including single, divorced, or 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	VALUE	SUBJECT TO DEBT? Yes / No	NAMES OF OWNERS
CASH	\$		
AUTOMOBILES (Make, Model, Year)			
1. ....			
2. ....			
3. ....			
CASH VALUE OF LIFE INSURANCE (Issuer, Face Value)			
REAL ESTATE (Location, Date Acquired)			
MARKETABLE SECURITIES (Issuer, Type, No. of Shares)			
OTHER (List)			
<b>TOTAL ASSETS</b>	<b>\$</b>		

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

CREDITOR	TYPE OF DEBT OR ACCOUNT NUMBER	NAME IN WHICH ACCOUNT IS CARRIED	ORIGINAL DEBT (Omit Rent)	PRESENT BALANCE (Omit Rent)	MONTHLY PAYMENTS	PAST DUE? Yes / No
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$	\$	\$	
<b>TOTAL DEBTS</b>			<b>\$</b>	<b>\$</b>	<b>\$</b>	



CREDIT REFERENCES (Paid off Accounts)	DATE PAID OFF

MY AUTO INSURANCE AGENT IS: (Name & Address)

Are you the co-maker, endorser, or guarantor on any loan or contract?  No  Yes - For Whom? \_\_\_\_\_ To Whom?

Are there any unsatisfied judgments against you?  No  Yes - Amount \$ \_\_\_\_\_ If "Yes", To Whom Owed? \_\_\_\_\_

Have you been declared bankrupt in the last 10 years?  No  Yes - Where? \_\_\_\_\_ Year? \_\_\_\_\_

OTHER OBLIGATIONS (For example, liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)

**SECTION E - SECURED CREDIT (Complete only if credit is to be secured.) Briefly describe the property to be given as security:**

PROPERTY DESCRIPTION  
.....

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY  
.....

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (if any):

**SIGNATURES, CERTIFICATIONS AND AUTHORIZATIONS**

Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and answer questions about your credit experience with me. I understand that I must update the information contained in this Credit Application if either my financial condition materially changes or the financial institution makes a request orally or in writing.

I authorize you to contact me using any of the telephone numbers listed on the Credit Application or that I subsequently provide you in connection with my credit account. Including any numbers that are assigned to a paging service, cellular telephone service, specialized mobile radio service, other common carrier service or any other service for which I may be charged for the call. I further authorize you to contact me through the use of voice, text and email, and through the use of prerecorded/artificial voice messages or an automatic dialing device.

**Electronic Signature** - If checked, I further agree that I have signed this Credit Application with one or more electronic signatures. I intend my electronic signature to have the effect of my written ink signature. I viewed and read the entire Credit Application and notices before I signed it. I received a paper copy of this Credit Application after it was signed. I understand that this Credit Application is in an electronic form that we will keep on file. We may rely on, and enforce, this Credit Application in the electronic form or as a paper version of the electronic form.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ OTHER SIGNATURE (Where Applicable) \_\_\_\_\_ DATE \_\_\_\_\_

**X** **Notice:** It is a federal crime punishable by fine, imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code § 1001. *et sea.*