



Personal Credit Application For Non-Real Estate Secured Loan

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. <input type="checkbox"/> SECURED <input type="checkbox"/> INDIVIDUAL CREDIT – relying solely on my income or assets <input type="checkbox"/> UNSECURED <input type="checkbox"/> INDIVIDUAL CREDIT – relying on my income or assets as well as income or assets from other sources <input type="checkbox"/> JOINT CREDIT – We intent to apply for joint credit. (initials) _____	FOR BANK USE Date _____ Account No. _____ <input type="checkbox"/> Approved by _____ <input type="checkbox"/> Declined by _____
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Amount Requested \$ _____	For how long (term) _____	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	HOME PHONE	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS
PRESENT ADDRESS (Street, City, State & ZIP) _____			COUNTY _____	Do you <input type="checkbox"/> own <input type="checkbox"/> rent	HOW LONG _____
PREVIOUS ADDRESS (Street, City, State & ZIP) - (Complete if less than 3 years at present address) _____			COUNTY _____	Did you <input type="checkbox"/> own <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. _____	
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 : <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> 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? _____	

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	HOME PHONE	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 : <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> 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) _____				Has Joint Applicant or Other Party ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> 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)			
CERTIFICATE OF DEPOSIT(S) (where)			
MARKETABLE SECURITIES (issuer, type, no. of Shares)			
REAL ESTATE (location, date acquired)			
LIFE INSURANCE (issuer, face value)			
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		\$	\$	\$
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 _____

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

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL ANME OF YOUR SPOUSE (if any). _____

SIGNATURE(S) I certify that everything I have stated in this application and on any attachments 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 understand that I must update credit information at Lender's request if my financial condition changes.

 Applicant's Signature Date Other Signature (where applicable) Date