PERSONAL LOAN APPLICATION

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

INFORMATION ABOUT CREDIT REQUEST

Please Check Appropriate Box

If you are applying for individual credit or an individual account, 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-D. If the requested credit or account is to be secured, also complete the first part of Section F.

If you are applying for joint credit with another person or for a joint account or an account that you and another person will use, complete all Sections, providing information in Section E about the joint applicant.

We intend to Applicant						applicant	11	171			
	ts of anothe	r person as	the basis for	or repayment	of the cre	edit requested, co	omplete	all Sections to th	e ext	separate maintenance or tent possible, providing relying.	
AMOUNT OF LOAN REQUESTED REQUESTED MOS. TO PAY HAVE YOU EVER					PPLIED TO US FOR A LOAN?						
\$ NO YES PURPOSE OF LOAN COLLATERAL OFFERED					WHEN? AND HOW OWNED						
			SE	CTION A -	APPLI	CANT					
NAME (Please print full_name)				IOME PHONE		CELL PHONE		BIRTH DATE S		SOCIAL SECURITY NUMBER	
PRESENT STREET ADDRESS					YEARS THERE:		DRIVE	VERS LICENSE NUMBER - STATE		ATE	
CITY AND STATE					ZIP E-MAIL		L ADDRESS				
IMMEDIATE PREVIOUS ADDRESS					YEARS THERE: NO.		NO. O	DF DEPENDENTS - LIST BY AGE			
CITY AND STATE					ZIP ARE Y		OU A U.S. CITIZEN?				
TWO NEAREST RELATIVES NOT LIVING WITH YOU OTHER THAN A PRESENT OR FORMER SPOI								No	10		
NAME ADDRESS 1.					CITY, STATE ZIP PHONE						
2.											
MY PRINCIPAL FINANCIAL INSTITUTION IS:		Checking Account No.		Savings Accoun	t No.	Cert. of Deposit		Safe Deposit		Loan	
OTHER FINANCIAL INSTITUTIONS USED:		Checking Account No.		Savings Accoun	t No.	Cert. of Deposit	Cert. of Deposit			Loan	
		SE	CTION B	- INCOME	E AND E	MPLOYMEN	Т				
PRESENT EMPLOYER					SALARY AND WAGES \$ MONTHLY INCOME \$						
EMPLOYER ADDRESS BUSINESS PHONE					OTHER INCOME: From Whom or Describe: 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.						
	DATE OF I		OF EMPLOY					\$			
POSITION OR TITLE SUPERVISOR									\$		
PREVIOUS EMPLOYER AND ADDRESS										\$	
										\$	
POSITION OR TITLE				YEARS EMPLOYED				TOTAL MONTHLY INCOME		\$	
Is any income listed in this Section likely to b	e reduced in the	next two years	or before the cr	edit requested is pa	nid off?	No	Yes	(Explain in detail, use se	eparate	sheet if needed):	
If you have chosen to disclose income from alimony, child support or separate maintenance, is such income pur Written Agreement Court Decree Other					suant to: HOW LONG RECEIVED? HOW OFTEN?			HOW OFTEN?	FROM WHOM?		
Have you ever been bankrupt or had any judgr	ments or garnish	ments against y	ou? No	o Yes	When?		'				
Are you a co-maker, endorser, or guarantor or	n any loan or coi	ntract? No	Yes	For Whom?		Т	o Whom?			Amount? \$	
				ECTION C e Additional							
DESCRIPTION OF ASSET VALUE (Include Account Number, if applicable)		UE OF ASSET	OF ASSET		AMOUNT OF DEBT		NAME OF OWNER(S)		E OF OWNER(S)		
\$						\$					
\$						\$					
s						s					
S					\$						
S					\$						
\$					\$						
\$											
				\$							

TOTAL ASSETS FROM ADDITIONAL SHEET

TOTAL ASSETS

SECTION D - LIABILITIES AND INDEBTEDNESS

(Use Additional Sheet If Needed)

List below all indebtedness to banks, credit unions, stores, finance companies, individuals and other creditors, including obligations to pay alimony, child support, separate maintenance, rent, mortgages, etc. COLLATERAL MONTHLY PAYMENT TYPE OF DEBT OR ACCOUNT NUMBER ORIGINAL DEBT CREDITOR PRESENT AMOUNT OWED \$ \$ TOTAL LIABILITIES FROM ADDITIONAL SHEET MONTHLY PAYMENTS LIABILITIES TOTALS MONTHLY DEBT ASSETS TO LIABILITIES SECTION E - JOINT APPLICANT, USER OR OTHER PARTY (Use Additional Sheet If Needed) NAME (Please print full name) HOME PHONE CELL PHONE BIRTH DATE SOCIAL SECURITY NUMBER PRESENT STREET ADDRESS YEARS THERE: DRIVERS LICENSE NUMBER - STATE CITY AND STATE ZIP E-MAIL ADDRESS IMMEDIATE PREVIOUS ADDRESS YEARS THERE: NO. OF DEPENDENTS - LIST BY AGE CITY AND STATE ZIP ARE YOU A U.S. CITIZEN? RELATIONSHIP TO APPLICANT CO-APPLICANT ENDORSER TWO NEAREST RELATIVES NOT LIVING WITH YOU OTHER THAN A PRESENT OR FORMER SPOUSE CITY, STATE ZIP PHONE NAME ADDRESS 1 2.
MY PRINCIPAL FINANCIAL INSTITUTION IS: Checking Account No. Savings Account No. Cert. of Deposit Safe Deposit OTHER FINANCIAL INSTITUTIONS USED Checking Account No Savings Account No. Cert. of Deposit Safe Deposit SALARY AND WAGES PRESENT EMPLOYER OTHER INCOME: From Whom or Describe: Alimony, child income need not be revealed if you do not wish to have it com EMPLOYER ADDRESS BUSINESS PHONE pport, or separate maintenance red as a basis for repaying this DATE OF EMPLOY POSITION OR TITLE SUPERVISOR \$ PREVIOUS EMPLOYER AND ADDRESS \$ POSITION OR TITLE YEARS EMPLOYED TOTAL MONTHLY \$ INCOME Is any income listed in this Section likely to be reduced in the next two years or before the credit requested is paid off Yes (Explain in detail, use separate sheet if needed) If you have chosen to disclose income from alimony, child support or separate maintenance, is such income pursuant to:

Written Agreement

Court Decree
Other HOW LONG RECEIVED? HOW OFTEN? FROM WHOM? Court Decree Have you ever been bankrupt or had any judgments or garnishments against you? No Yes When? Are you a co-maker, endorser, or guarantor on any loan or contract? For Whom? To Whom? Amount? \$ SECTION F - MARITAL STATUS Complete this Section ONLY if the loan requested is to be secured, or you reside in a community property state, or you are relying on property located in a community property state to repay the loan. OTHER PARTY: APPLICANT: Married Separated Unmarried (including single, divorced and widowed) Married Separated Unmarried (including single, divorced and widowed) **SIGNATURES** 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 loan is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me APPLICANT SIGNATURE CO-APPLICANT/CO-SIGNER/GUARANTOR/ENDORSER SIGNATURE (Where Applicable) DATE DATE MORTGAGE LOAN ORIGINATOR INFORMATION THIS INFORMATION APPLIES TO CONSUMER LOANS SECURED BY A DWELLING (OTHER THAN HOME EQUITY LINE OF CREDIT OR CREDIT SECURED BY TIMESHARE PLAN INTEREST) Loan Originator's Phone Number (including area code) Loan Originator's Name Loan Originator Identifier Loan Origination Company's Name Loan Origination Company Identifier Loan Origination Company's Address