

## 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 Section 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.
- 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 income or assets you are relying. If the requested credit is to be secured, then complete Section E.

AMOUNT REQUESTED \$	PAYMENT DATE DESIRED	PROCEEDS OF CREDIT TO BE USED FOR	
<b>SECTION A - INFORMATION REGARDING APPLICANT</b>			
FULL NAME (LAST, FIRST, MIDDLE)		BIRTH DATE	SOCIAL SECURITY NO.
PRESENT ADDRESS (Street, City, State & Zip)			HOW LONG AT PRESENT ADDRESS?
PREVIOUS ADDRESS (Street, City, State & Zip)			HOW LONG AT PREVIOUS ADDRESS?
PRESENT EMPLOYER (Company Name & Address)			
HOW LONG WITH PRESENT EMPLOYER?	YOUR POSITION OR TITLE	NAME OF SUPERVISOR	BUSINESS PHONE Ext.
PREVIOUS EMPLOYER (Company Name & Address)			HOW LONG WITH PREVIOUS EMPLOYER?
YOUR PRESENT <b>GROSS</b> SALARY OR COMMISSION \$ PER	YOUR PRESENT <b>NET</b> SALARY OR COMMISSION \$ PER	NO. DEPENDENTS	AGES OF DEPENDENTS
<b>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.</b>			
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding			
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME		
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)			
Have you ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?		Checking Account No. Where?	Savings Account No. Where?
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE NO. (Include Area Code)
<b>SECTION B - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheets if necessary.)</b>			
FULL NAME (Last, First, Middle)		BIRTH DATE	SOCIAL SECURITY NO.
RELATIONSHIP TO APPLICANT (If Any)	PRESENT ADDRESS (Street, City, State & Zip)		HOW LONG AT PRESENT ADDRESS?
PRESENT EMPLOYER (Company Name & Address)			
HOW LONG WITH PRESENT EMPLOYER?	POSITION OR TITLE	NAME OF SUPERVISOR	BUSINESS PHONE Ext.
PREVIOUS EMPLOYER (Company Name & Address)			HOW LONG WITH PREVIOUS EMPLOYER?
YOUR PRESENT <b>GROSS</b> SALARY OR COMMISSION \$ PER	YOUR PRESENT <b>NET</b> SALARY OR COMMISSION \$ PER	NO. DEPENDENTS	AGES OF DEPENDENTS
<b>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.</b>			
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding			
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME		
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)			
Has Joint Applicant or Other party ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes		Checking Account No. Where?	Savings Account No. Where?
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE NO. (Include Area Code)
<b>SECTION C - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)</b>			
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 complete, 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.

OUTSTANDING DEBTS (Include charge account, 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		\$	\$	\$	
	AUTOMOBILES (Make, Model, Year)					
	1.					
	2.					
TOTAL DEBTS			\$	\$	\$	

CREDIT REFERENCES (Paid Off Account)

DATE PAID OFF

			\$		

MY AUTO INSURANCE AGENT IS (Name & Address)

Are you a 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 14 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

If Motor vehicle, including:  radio  power seats  automatic transmission  power brakes  power windows  
 no. of cylinders  air conditioning  power steering  \_\_\_\_\_

NAMES & ADDRESS OF ALL CO-OWNERS OF THE PROPERTY

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

I desire Life Insurance . . . . . Yes  No

I understand that in requesting this life insurance it was not made a prerequisite to secure the loan. It is purely voluntary on my part.

**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 it is approved. You are APPLICANT SIGNATURE

authorized to check my credit and employment history and to answer questions about your credit experience with me.

OTHER SIGNATURE (Where Applicable)

X

DATE

X

DATE

**BANK USE ONLY**

Approved by:	Declined by:

COMMENTS:

**Regulation B Notice of Intent to Apply for Joint Credit**

**Lender**

**Applicant**

Date	_____
Account	_____
Number	_____

**Notice**

You intend to apply for joint credit.

**Acknowledgment**

You acknowledge receipt of a copy of this notice on today's date.

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_