

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. (Please initial here) Applicant _____ Co-Applicant _____
- 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 about the person whose alimony, support, or maintenance payments or income or assets you are relying on. If the requested credit is to be secured, then complete Section E.

| | | |
|------------------------|----------------------|-----------------------------------|
| AMOUNT REQUESTED \$ | PAYMENT DATE DESIRED | PROCEEDS OF CREDIT TO BE USED FOR |
|------------------------|----------------------|-----------------------------------|

SECTION A - INFORMATION REGARDING APPLICANT

| | | | |
|--|---|---|---|
| FULL NAME (Last, First Middle) | | BIRTH DATE | SOCIAL SECURITY NO. |
| PRESENT ADDRESS (Street, City, State, & Zip) | | | PHONE <small>HOW LONG AT PRESENT ADDRESS?</small> |
| PREVIOUS ADDRESS (Street, City, State, & Zip) | | | <small>HOW LONG AT PREVIOUS ADDRESS?</small> |
| PRESENT EMPLOYER (Company Name & Address) | | | |
| <small>HOW LONG WITH PRESENT EMPLOYER?</small> | YOUR POSITION OR TITLE | NAME OF SUPERVISOR | BUSINESS PHONE Ext. |
| PREVIOUS EMPLOYER (Company Name & Address) | | | <small>HOW LONG WITH PREVIOUS EMPLOYER?</small> |
| <small>YOUR PRESENT GROSS SALARY OR COMMISSION</small> \$ PER | <small>YOUR PRESENT NET SALARY OR COMMISSION</small> \$ PER | NO. DEPENDENTS | AGES OF DEPENDENTS |
| 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 | | | |
| OTHER INCOME \$ PER | SOURCES OF OTHER INCOME | | Total \$ |
| 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) |
| 1. | | | |
| 2. | | | |

SECTION B - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheets if necessary.)

| | | | |
|--|--|---|---|
| FULL NAME (Last, First, Middle) | | BIRTH DATE | SOCIAL SECURITY NO. |
| RELATIONSHIP TO APPLICANT (If Any) | PRESENT ADDRESS (Street, City, State, & Zip) | | <small>HOW LONG AT PRESENT ADDRESS?</small> |
| PRESENT EMPLOYER (Company Name & Address) | | | HOME PHONE |
| <small>HOW LONG WITH PRESENT EMPLOYER?</small> | POSITION OR TITLE | NAME OF SUPERVISOR | BUSINESS PHONE Ext. |
| PREVIOUS EMPLOYER (Company Name & Address) | | | <small>HOW LONG WITH PREVIOUS EMPLOYER?</small> |
| <small>YOUR PRESENT GROSS SALARY OR COMMISSION</small> \$ PER | <small>YOUR PRESENT NET SALARY OR COMMISSION</small> \$ PER | NO. DEPENDENTS | AGES OF DEPENDENTS |
| 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 | | | |
| 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) |

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, 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.

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) | | | |
| TOTAL ASSETS | \$ | | |

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 | RENT PAYMENT MORTGAGE | | \$ | \$ | \$ | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTAL DEBTS | | | \$ | \$ | \$ | |

CREDIT REFERENCES (PAID OFF ACCOUNTS)

| | DATE PAID OFF |
|--|---------------|
| | |
| | |

MY AUTO INSURANCE AGENT IS: (Name & Address)

DRIVERS LICENSE # -

STATE -

Are you a co-maker, endorser, or guarantor on any loan or contract? No Yes - For Whom?

To Whom?

Are there any unsatisfied judgements 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

IF VEHICLE, PLEASE COMPLETE

COLOR-

MODEL-

PLATE NO.-

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY

SECTION F - CREDIT DISCLOSURE:

THE LENDER MAY NOT CONDITION AN EXTENSION OF CREDIT ON EITHER:

(1) My purchase of an insurance product or annuity from the lender or any of its affiliates; or

(2) My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

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 authorized to check my credit and employment history and to answer questions about your credit experience with me. I further acknowledge that I have received the disclosures described in Section F

APPLICANT'S SIGNATURE

DATE

OTHER SIGNATURE (Where Applicable)

DATE

X

X