

# CONSUMER LOAN APPLICATION

CREDIT REQUESTED					
Account Requested <input type="checkbox"/> Individual <input type="checkbox"/> Joint We intend to apply for joint credit.	Amt. Requested	# of Payments	Preferred Pmt. Amt.	Preferred Pmt. Day	Market Survey
Specific Purpose of Loan					
Collateral Offered					
Applicant      Co-Applicant					

## COMPLETION INSTRUCTIONS FOR APPLICANT

Complete the Applicant Information section for the first Applicant. Mark the appropriate box to indicate whether the Applicant is applying as a Borrower, Cosigner, Guarantor, Grantor (of collateral), or Other for a different capacity. If the Applicant is married, he or she may apply for individual credit.

APPLICANT INFORMATION: <input type="checkbox"/> Borrower <input type="checkbox"/> Cosigner <input type="checkbox"/> Guarantor <input type="checkbox"/> Grantor <input type="checkbox"/> Other:					
Applicant's Full Name (First M.I. Last)		Social Security Number		Former Names and Aliases	
Home Phone	Date of Birth	Driver's License Number	Ages of Dependents	Years of Education	Years in Current Profession

ADDRESS INFORMATION				
Home Address (Street, City, State, Zip Code) (If rural, show Road and Box No)			Since	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Mailing Address (Street or P.O. Box, City, State, Zip Code)				
Previous Home Address (Street, City, State, Zip Code)			From	To

EMPLOYMENT INFORMATION					
Applicant's Employer (If Self-Employed, Name and Nature of Business)			Business Address (Street, City, State, Zip Code)		
Type of Business	Supervisor	Phone Number	Title / Position	Since	Salary per
Second Employer (If Self-Employed, Name and Nature of Business)			Business Address (Street, City, State, Zip Code)		
Type of Business	Supervisor	Phone Number	Title / Position	Since	Salary per

PERSONAL REFERENCES			
Name	Address (Street or P.O. Box, City, State, Zip Code)	Phone Number	Relationship

## COMPLETION INSTRUCTIONS FOR CO-APPLICANTS

(a) If you are applying for joint credit or will be permitted to use the account, complete the Co-Applicant Information section as a Borrower. (b) If the Applicant is applying for individual credit, but 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 the Co-Applicant Information section, to the extent possible, providing information about the person on whose alimony, support, or maintenance payments or income or assets the Applicant is relying. (c) If the 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, complete the Co-Applicant Information section with regard to the Applicant's spouse.

CO-APPLICANT INFORMATION: <input type="checkbox"/> Borrower <input type="checkbox"/> Cosigner <input type="checkbox"/> Guarantor <input type="checkbox"/> Grantor <input type="checkbox"/> Other:					
Co-Applicant's Full Name (First M.I. Last)		Social Security Number		Former Names and Aliases	
Home Phone	Date of Birth	Driver's License Number	Ages of Dependents	Years of Education	Years in Current Profession

ADDRESS INFORMATION				
Home Address (Street, City, State, Zip Code) (If rural, show Road and Box No)			Since	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Mailing Address (Street or P.O. Box, City, State, Zip Code)				
Previous Home Address (Street, City, State, Zip Code)			From	To

**EMPLOYMENT INFORMATION**

Co-Applicant's Employer (If Self-Employed, Name and Nature of Business)

Business Address (Street, City, State, Zip Code)

Type of Business

Supervisor

Phone Number

Title / Position

Since

Salary

per

Second Employer (If Self-Employed, Name and Nature of Business)

Business Address (Street, City, State, Zip Code)

Type of Business

Supervisor

Phone Number

Title / Position

Since

Salary

per

**PERSONAL REFERENCES**

Name

Address (Street or P.O. Box, City, State, Zip Code)

Phone Number

Relationship

**QUESTIONS**

Applicant (1)

Co-Applicant (2)

Explanation (Please use an attached sheet if necessary.)

Yes  No

Yes  No

Are there any outstanding judgments against you?

Yes  No

Yes  No

Have you ever been declared bankrupt?

Yes  No

Yes  No

Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?

Yes  No

Yes  No

Are you party to a lawsuit?

Yes  No

Yes  No

Are you obligated on any loan resulting in judgment, foreclosure or title transfer?

Yes  No

Yes  No

Are you delinquent/in default on any Federal debt, financial obligation, bond, or loan guarantee?

Yes  No

Yes  No

Are you obligated to pay alimony, child support, or separate maintenance?

Yes  No

Yes  No

Is any part of the down payment borrowed?

Yes  No

Yes  No

Are you a co-maker or an endorser on a loan?

Yes  No

Yes  No

Have you ever had merchandise repossessed?

Yes  No

Yes  No

Have you ever been denied credit with this lender?

Yes  No

Yes  No

Are you a U.S. citizen?

Yes  No

Yes  No

If no, are you a resident alien?

Yes  No

Yes  No

If no, are you a non-resident alien?

**PREVIOUS CREDIT REFERENCES**

Names Credit Listed In

Loan Purpose

Creditor Name and Address

Account Number

Highest Balance

Date Paid

App  CoApp  Other

\$

App  CoApp  Other

App  CoApp  Other

App  CoApp  Other

**SCHEDULE OF OTHER INCOME**

NOTICE: 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

Court Order

Written Agreement

Oral Understanding

Other

**PARTIES**

INCOME TYPES:

A = Alimony/Child Support

B = Bonuses

C = Commissions

I = Interest & Dividends

O = Overtime

R = Retirement

X = Other

App	CoA	Joint	Type	Description	Amount	Frequency



**SCHEDULE OF REAL ESTATE OWNED**

**PARTIES** TYPES: S=Single Family D=Duplex T=Triplex F=Four-Plex C=Condominium P=P.U.D. L=Land O=Summary/Other

App	CoA	Joint	Type:	Property Disposition: <input type="checkbox"/> Sold <input type="checkbox"/> Pending Sale <input type="checkbox"/> Rental <input type="checkbox"/> N/A				
			Description	Property Address		Date Acquired	Cost	Principal Residence <input type="checkbox"/> Yes <input type="checkbox"/> No
			Current Market Value	Total Mortgages & Liens	Gross Rental Income	Taxes, Ins., Maint.	Net Rental Income	
Creditor 1 Name and Address				Unpaid Bal.	Pmt. Amt.	Per	Lien Position <input type="checkbox"/> First Lien <input type="checkbox"/> Junior Lien	
Creditor 2 Name and Address				Unpaid Bal.	Pmt. Amt.	Per	Lien Position <input type="checkbox"/> First Lien <input type="checkbox"/> Junior Lien	

App	CoA	Joint	Type:	Property Disposition: <input type="checkbox"/> Sold <input type="checkbox"/> Pending Sale <input type="checkbox"/> Rental <input type="checkbox"/> N/A				
			Description	Property Address		Date Acquired	Cost	Principal Residence <input type="checkbox"/> Yes <input type="checkbox"/> No
			Current Market Value	Total Mortgages & Liens	Gross Rental Income	Taxes, Ins., Maint.	Net Rental Income	
Creditor 1 Name and Address				Unpaid Bal.	Pmt. Amt.	Per	Lien Position <input type="checkbox"/> First Lien <input type="checkbox"/> Junior Lien	
Creditor 2 Name and Address				Unpaid Bal.	Pmt. Amt.	Per	Lien Position <input type="checkbox"/> First Lien <input type="checkbox"/> Junior Lien	

App	CoA	Joint	Type:	Property Disposition: <input type="checkbox"/> Sold <input type="checkbox"/> Pending Sale <input type="checkbox"/> Rental <input type="checkbox"/> N/A				
			Description	Property Address		Date Acquired	Cost	Principal Residence <input type="checkbox"/> Yes <input type="checkbox"/> No
			Current Market Value	Total Mortgages & Liens	Gross Rental Income	Taxes, Ins., Maint.	Net Rental Income	
Creditor 1 Name and Address				Unpaid Bal.	Pmt. Amt.	Per	Lien Position <input type="checkbox"/> First Lien <input type="checkbox"/> Junior Lien	
Creditor 2 Name and Address				Unpaid Bal.	Pmt. Amt.	Per	Lien Position <input type="checkbox"/> First Lien <input type="checkbox"/> Junior Lien	

**CREDIT LIFE AND DISABILITY INSURANCE**

Applicant desires the following voluntary insurance:  Credit Life  Credit Disability  Involuntary Unemployment  
 Co-Applicant desires the following voluntary insurance:  Credit Life  Credit Disability  Involuntary Unemployment

**APPLICANT SIGNATURE(S)**

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

APPLICANT:

X \_\_\_\_\_ Date X \_\_\_\_\_ Date  
 Applicant Co-Applicant

**FOR LENDER'S USE ONLY**

Officer No. / Name	Approved By	Concurrence By (If Needed)	Committee Date	Decision Date
Branch	Application Date	Application No.	Commitment No.	Loan No.
Mortgage Loan Originator Unique Identifier, if applicable:		Mortgage Loan Origination Company Identifier, if applicable:		

Decision and Comments:  Approved  Denied  Incomplete  Counteroffer  Conditional Approval  Withdrawal  Other: \_\_\_\_\_