



[Privacy Statement](#)

FDIC | Equal Housing Lender

## Auto Loan Application

First Name:

Last Name:

Submitted on:

Applicants must reside in the Counties of LaSalle, Bureau or Putnam, in the State of Illinois.

### Important Information about Procedures for Opening a New Account

Identification Procedures Requirements: 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.

### Security Notice:

You should ONLY fill out this form on-line if you are using a browser with the latest security enhancements. If you don't have the latest version, download a copy now. This form is NOT cached (saved in your computer's memory) when you QUIT your browser.

### Instructions:

1. Print this loan application and gather the information you'll need.
2. Complete application on-line and click "Submit Application" or fax it to 815-224-4156.
3. To safeguard your privacy, QUIT your browser and restart it again after using this form.

This loan application is for personal loans only and is NOT intended for commercial use. A valid social security number is required to apply. Please review and gather the information you will need before completing this form. Upon receipt of the application, we will send you the proper disclosures.

### Auto Loan Request

Amount Requested:

Type of Application:

Individual Applicant

Joint Applicant

Desired Monthly Payment

or Term Requested:

24 mos.

36 mos.

48 mos.

60 mos.

Other:

<b>Vehicle Description (required)</b>	<b>Year of Vehicle</b>	<b>Make</b>	<b>Model</b>
	_____	_____	_____
	<b>Purchase Price</b>	<b>Down Payment</b>	<b>Finance Amount</b>
	_____	_____	_____
<b>Dealer Name</b>	_____		
<b>Trade-In</b>	<input type="radio"/> Yes <input type="radio"/> No		
<b>Purchasing from Dealer</b>	<input type="radio"/> Yes <input type="radio"/> No		
<b>Creditor of Trade-In</b>	_____		
<b>Applicant</b>			
<b>First Name</b>	<b>Middle Initial</b>	<b>Last Name</b>	
_____	_____	_____	
<b>Date of Birth</b>	<b>Social Security No.</b>	<b>No. of Dependents</b>	
_____	_____	_____	
<b>Driver's License No.</b>	<b>Driver's License State</b>	<b>Your E-mail Address</b>	
_____	_____	_____	
<b>Home Phone</b>	<b>Best Time to Call</b>	<b>Work Phone</b>	
_____	_____	_____	
<b>Are there any unsatisfied Judgments against you?</b>	<input type="radio"/> Yes <input type="radio"/> No		
<b>Have you been declared bankrupt in the last 7 years?</b>	<input type="radio"/> Yes <input type="radio"/> No		
<b>Residence</b>			
<b>Your Primary Residence:</b>	<input type="radio"/> Own with Mortgage <input type="radio"/> Own Clear <input type="radio"/> Rent <input type="radio"/> Other:		

Address Information	Address Line 1
	Address Line 2
	City State ZIP Code

Years At Present Address	Your Monthly rate or Mortgage Payment
_____	_____

Years At Previous Address	Your Previous Address
_____	_____

**Home Information**

Collateral Property Address (If different from above)	Date Purchased
_____	_____

Current Mortgage Holder	Mortgage Holder Phone
_____	_____

Purchase Price	Market Value	Mortgage Balance
_____	_____	_____

**Employment**

<input type="radio"/> Employed <input type="radio"/> Unemployed <input type="radio"/> Self-Employed <input type="radio"/> Retired <input type="radio"/> Student
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Your Present Employer	Phone
_____	_____

Address Information	Address Line 1
	Address Line 2
	City State ZIP Code

Gross Monthly Salary	Your Position	Years There
_____	_____	_____

You do not have to list alimony, child support or separate maintenance income unless you want us to consider it for the purposes of granting and repayment of this credit request.

**Other Monthly Income**

**Source of Other Income**

**Previous Employer (if less than 3 years at current employer)**

**Years at Previous Employer**

Address Information

Address Line 1

Address Line 2

City

State

ZIP Code

**Additional Information**

**Your Checking Account Number**

**Institution Name**

**Your Savings Account Number**

**Institution Name**

**Name of Creditor**

**Approx. Balance**

**Monthly Payment**

**Collateral, if any**

Total Amount of Other  
Monthly Payments not listed  
above:

**Assets**

**Value**

**Title Held Name**

**Co-Applicant**

**First Name**

**Middle Initial**

**Last Name**

**Date of Birth**

**Social Security No.**

**No. of Dependents**

Driver's License No.

Driver's License State

Your E-mail Address

Home Phone

Best Time To Call

Work Phone

**Co-Applicant Residence**

Your Primary Residence:

- Own with Mortgage
- Own Clear
- Rent
- Other:

Address Information

Address Line 1

Address Line 2

City

State

ZIP Code

Years At Present Address

Your Monthly Rent or Mortgage Payment

Years At Previous Address

Your Previous Address

**Co-Applicant Home Information**

Collateral Property Address (If different from above)

Date Purchased

Current Mortgage Holder

Mortgage Holder Phone

Purchase Price

Market Value

Mortgage Balance

**Co-Applicant Employment**

- Employed
- Self - Employed
- Retired
- Unemployed
- Student

**Your Present Employer**

**Phone**

\_\_\_\_\_

Address Information

Address Line 1

Address Line 2

City

State

ZIP Code

\_\_\_\_\_

**Gross Monthly Salary**

**Your Position**

**Years There**

\_\_\_\_\_

-  
You do not have to list alimony, child support or separate maintenance income unless you want us to consider it for the purposes of granting and repayment of this credit request.

**Other Monthly Income**

**Source of Other Income**

\_\_\_\_\_

**Previous Employer (if less than 3 years at current employer)**

**Years at Previous Employer**

\_\_\_\_\_

Address Information

Address Line 1

Address Line 2

City

State

ZIP Code

\_\_\_\_\_

**Co-Applicant Additional Information**

**Your Checking Account Number**

**Institution Name**

\_\_\_\_\_

**Your Savings Account Number**

**Institution Name**

\_\_\_\_\_

Name of Creditor	Approx. Balance	Monthly Payment	Collateral, if any
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Amount of Other Monthly Payments not listed above:	
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Assets	Value	Title Held Name
_____	_____	_____

**Applicant(s) Statement**

**Applicant(s) Statement**  
 I/We have completed this request for credit in consideration of **Peru Federal Savings Bank** lending to me and/or others upon my guarantee. I/We certify that all information contained herein is accurate and complete to the best of my knowledge.

I/We authorize **Peru Federal Savings Bank** to retain property of this application, to rely on the foregoing, to check and verify my credit, employment and salary history, to secure follow up credit reports concerning my credit worthiness and to exchange information about my account with proper persons, creditors and credit bureaus.

I authorize my employer (present and future), bank and other references listed above to release and/or verify information to **Peru Federal Savings Bank** at any time. I acknowledge that this application is subject to approval of credit and acceptance by **Peru Federal Savings Bank**. Should my request for credit and subsequent loan be approved, I agree to give **Peru Federal Savings Bank** written notice immediately upon change of my name, address, employment or any other pertinent information contained herein.

(required)	<input type="checkbox"/> I/We AGREE with the above statement
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