

## FDIC | Equal Housing Lender

## Personal Loan Application

Last Name:		
inty of La Salle, Bureau or Putnam, in the State of Illinois.		
uirements: To help the government fight the funding of terroris utions to obtain, verify, and record information that identifies earn you open an account, we will ask for your name, address, do nay also ask to see your driver's license or other identifying do not form on-line if you are using a browser with the latest security	ach person who opens an account. date of birth, and other information that will cuments. enhancements. If you don't have the latest	
e and click "Submit Application" or fax it to 815-224-4156.		
ner the information you will need before completing this form. U		
Personal Loan Request		
<ul><li>☐ Individual Applicant</li><li>☐ Joint Applicant</li></ul>		
Applicant		
Middle Initial	Last Name	
Social Security No.	No. of Dependents	
No. Driver's License State	Your E-mail Address	
Best Time To Call	Work Phone	
P q t t i i i i i i i i i i i i i i i i i	unty of La Salle, Bureau or Putnam, in the State of Illinois.  Procedures for Opening a New Account quirements: To help the government fight the funding of terroris tutions to obtain, verify, and record information that identifies elen you open an account, we will ask for your name, address, on may also ask to see your driver's license or other identifying do form on-line if you are using a browser with the latest security w. This form is NOT cached (saved in your computer's memory and gather the information you'll need.  In eand click "Submit Application" or fax it to 815-224-4156.  In QUIT your browser and restart it again after using this form. It is the information you will need before completing this form. It is personal Loan Request  Personal Loan Request  Applicant  Middle Initial  Social Security No.  Driver's License State	

Are there any unsatisfied Judgments against you?	<ul><li>○ Yes</li><li>○ No</li></ul>		
Have you been declared bankrupt in the last 7 years?	○ Yes ○ No		
		Residence	
Your Primary Residence:	Own with Mortgage Own Clear Rent Other		
Present Address	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		Your Previous Address	
		Home Information	
Collateral Property Address (If different from above)  Date Purchased			
Curre	ent Mortgage Holder		Mortgage Holder Phone
Purchase Pri	ice	Market Value	Mortgage Balance
		Employment	
	<ul><li>Employed</li><li>Self-Employed</li><li>Unemployed</li><li>Retired</li><li>Student</li></ul>		

	Your Present Employer		Phone
Address Information	Address Line 1  Address Line 2		
	City	State	ZIP Code
Gross M	onthly Salary	Your Position	Years There
You do not have to list alimo granting and repayment of the	ny, child support or separate mainter	nance income unless you want ເ	us to consider it for the purposes of
Other	Monthly Income	Source	of Other Income
Previous En	nployer (if less than 3 years at curren	nt employer)	Years at Previous Employer
	Address Line 1		
Address Information	Address Line 2 City	State	ZIP Code
	Addition	nal Information	
	Your Checking Account Number		Institution Name
	Your Savings Account Number.		Institution Name
Name of Creditor	Approx. Balance	Monthly Payment	Collateral, if any

Monthly Payments not listed above:			
Assets	Va	lue	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		
Present Address	Address Line 1  Address Line 2  City	State	ZIP Code
Years At Present Address Your Monthly Rent or Mortgage Payment		hly Rent or Mortgage Payment	
Years At Previous Address			Your Previous Address
Col	lateral Property Address	Co-Applicant Home Information	Date Purchased

**Total Amount of Other** 

Current Mortgage Holder			Mortgage Holder Phone		
Purchase Price Mark		Market Value	Mortgage Balance		
		Co-Applicant Employment			
	<ul><li>Employed</li><li>Self-Employed</li></ul>				
	<ul><li>○ Unemployed</li><li>○ Retired</li></ul>				
	Student				
	Your Present En	nployer	Phone		
	Address Line 1				
Address Information Address Line 2					
	City	State	ZIP Code		
Gross M	onthly Salary	Your Position	Years There		
You do not have to list alimo	ony, child support or separa	ate maintenance income unless you	want us to consider it for the purposes of		
Other Monthly Income		s	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			

	our 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 H	eld Name		
Applicant(s) Statement  I/We have completed this request for credit in consideration of BankName 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 BankName. 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)	I/We AGREE with the above state	ment			