

Member FDIC | Equal Housing Lender Privacy Statement

Personal Loan Application

First Name:		Last Name:		
Submitted on:				
	Joint Credit Co-Signed Guaranty			
Applicant Name (Last, First,	Guaranty			
Middle Initial)				
	Married Unmarried			
	Separated Unknown			
Customer Since (enter year)				
Present Address (required)	Address Line 1 Address Line 2		710.0	
	City	State	ZIP Code	
How Long at Present Address?				
Previous Address	Address Line 1 Address Line 2			
	City	State	ZIP Code	
How Long at Previous Address?				
Social Security Number				
Date of Birth				
Drivers License Number				
Phone Number (required)				
Current Employer				
Position				

How long in current position?				
	Address Line 1			
Current Employer Address	Address Line 2			
	City	State	ZIP Code	
Current Employer Phone Number				
Gross Monthly Income				
	Full time Part time			
Hours				
Former Employer				
Position				
How long in former position?				
Former Employer Address	Address Line 1			
Tomer Employer Address	Address Line 2			
	City	State	ZIP Code	
Former Employer Phone Number				
Previous Gross Monthly Income				
	Full Time Part Time			
Hours				
Alimony, child support, or se for repaying this obligation.	parate maintenance income	need not be revealed if applicar	nt does not wish to have it consid	dered as a basis
Other Income (Monthly)				
Source of Other Income				
Full Name of Nearest Relative Not Living with Applicant				
Relationship				
	Address Line 1			
Relative's Addresss	Address Line 2			
	City	State	ZIP Code	
Relative's Phone Number				

	Creditor	Name	Monthly Payment	
				=
Outstanding Debts (required)				-
(- 1)				-
				-
Joint Applicant Name (Last,				-
First, Middle Initial)				
	Married			
	Unmarried			
	Separated			
	Unknown			
Customer Since				
	Address Line 1			
Joint Applicant Present Address	Address Line 2			-
	City	State	ZIP Code	-
How Long at Present Address?				
	Address Line 1			
Joint Applicant Previous Address	Address Line 2			-
Address	City	State	ZIP Code	-
How Long at Previous				_
Address? Joint Applicant Social				
Security Number Joint Applicant Date of Birth				
Joint Applicant Drivers				
License Number Joint Applicant Phone Number				
Joint Applicant Current Employer				
Position				
How long in current position?				

	Address Line 1			
Joint Applicant Current Employer Address	Address Line 2			
	City	State	ZIP Code	
Joint Applicant Current Employer Phone Number				
Gross Monthly Income				
	Full Time			
	Part Time			
Hours				
Joint Applicant Former Employer				
Joint Applicant Former Position				
How long in former position?				
Leigh Applicant Frances	Address Line 1			
Joint Applicant Former Employer Address	Address Line 2			
	City	State	ZIP Code	
Joint Applicant Former Employer Phone Number				
Joint Applicant Previous Gross Monthly Income				
	Full Time			
	Part Time			
Hours				
Alimony, child support, or sep repaying the obligation.	parate maintenance income	need not be revealed if applica	nt does not wish it considered as a b	pasis for
Other Income				
Source of Other Income				
Full Name of Nearest Relative Not Living with Joint Applicant				
Relationship				
	Address Line 1			
Relative's Address	Address Line 2			
	City	State	ZIP Code	
Relative's Phone Number				

	Creditor	Monthly Payment
Outstanding Debts (required)		
Purpose (Reason for Request) (required)		
Collateral Offered (Describe) (required)		
Amount Requested (required)		
We intend to apply for joint cr	redit. By initialing below we acknowledge the	intention to apply for joint credit on today's date.
Applicant Initials		
Joint Applicant Initials		
Today's Date		
whether or not it is approved.	By signing below I authorize Lender to chec	n any attachment is correct. Lender may keep this application k my credit and employment history and to answer questions ate financial, credit or collateral information at Lender's
Authorization	Signature	Date
Authorization	Signature	Date
Signature		
Date		
Signature		
Date		

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit.

FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:

- 1. My purchase of an insurance product or annuity from you or any of your affiliates; or
- 2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

Authorization	Signature	Date		
Authorization	Signature	Date		
Signature				
Date				
Signature				
Date				
THE FOLLOWING SECTION IS ONLY TO BE COMPLETED IF THE LOAN BEING REQUESTED IS SECURED BY A DWELLING. The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may not discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not wish to furnish the information, please check the box below. Lender must review the above material to assure the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.				
BORROWER	I do not wish to furnish this information.			
Borrower Ethnicity	Hispanic or Latino Mexican Puerto Rican Cuban Other Hispanic or Latino Not Hispanic or Latino			

	American Indian or Alaska Native Asian
	Asian Indian Chinese
	☐ Filipino ☐ Japanese
	☐ Korean☐ Vietnamese
Borrower Race	Other Asian Black or African American
	 □ Native Hawaiian or Other Pacific Islander □ Native Hawaiian
	Guamanian or Chamorro Samoan
	Other Pacific Islander White
Borrower Sex	Female Male
CO-BORROWER	O I do not wish to furnish this information.
Co-Borrower Ethnicity	Hispanic or Latino Mexican
	☐ Puerto Rican ☐ Cuban
	Other Hispanic or Latino Not Hispanic or Latino

	American Indian or Alaska Native						
	Asian						
	Asian Indian	Asian Indian					
	Chinese						
	Filipino						
	Japanese	Japanese					
	☐ Korean						
	Vietnamese						
Co-Borrower Race	Other Asian						
	Black or African American						
	Native Hawaiian or Pacific Islander						
	Native Hawaiian Native Hawaiian						
	Guamanian or Chamorro						
	Samoan						
	Other Pacific Islande	Other Pacific Islander					
	White						
Co-Borrower Sex	Female						
	Male Male						
To be Completed by	Face-to-face interview	W					
To be Completed by Interviewer This application was taken	Mail Mail						
by:	Phone						
	Internet						
Interviewer's Name							
Name of Interviewer's Employer							
	Address Line 1						
Address of Interviewer's	Address Line 1 Address Line 2						
Employer	City	State	ZIP Code				
Interviewer's Phone Number							

	Interviewer's Signature		
Authorization	Signature	Date	
Unique Identifier			