



## Auto Loan Application

First Name:

Last Name:

Submitted on:

### Privacy Policy:

Our [privacy policy](#) protects the privacy of your personally-identifying information that you provide us online.

**Applicants** must reside in the State of Massachusetts in Bristol, Norfolk or Plymouth Counties.

### 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 781-341-4530.
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

If you are applying for Joint Credit, please insert your initials below. (required)

**Applicant Initials**

**Co-Applicant Initials**

Term Requested:

☐ 36 months

☐ 48 months

☐ 60 months

☐ 72 months

☐ Other:

Vehicle Description (required)	Year of Vehicle	Make	Model
<div></div>			
Purchase Price	Down Payment	Finance Amount	
<div></div>			
Dealer Name			
Trade-In	<input type="radio"/> Yes <input type="radio"/> No		
Purchasing from Dealer	<input type="radio"/> Yes <input type="radio"/> No		
Creditor of Trade-In			
Applicant			
First Name	Middle Initial	Last Name	
<div></div>			
Date of Birth	Social Security No.	No. of Dependents	
<div></div>			
Driver's License No.	Driver's License State	Your E-mail Address	
<div></div>			
Home Phone	Best Time to Call	Work Phone	
<div></div>			
Are there any unsatisfied Judgments against you?	<input type="radio"/> Yes <input type="radio"/> No		
Have you been declared bankrupt in the last 7 years?	<input type="radio"/> Yes <input type="radio"/> No		
Residence			
Your Primary Residence:	<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 Rentor 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		
Your Present Employer			Phone
Address Information	Address Line 1		
	Address Line 2		
	City	State	ZIP Code
Gross Monthly Salary		Your Position	Years There

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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:	_____
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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:		<div><input type="radio"/> Own with Mortgage</div> <div><input type="radio"/> Own Clear</div> <div><input type="radio"/> Rent</div> <div><input type="radio"/> Other:</div>			
Address Information		<div>Address Line 1</div> <div>Address Line 2</div> <div>CityStateZIP Code</div>			
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					

	<div><input type="radio"/> Employed</div> <div><input type="radio"/> Self - Employed</div> <div><input type="radio"/> Retired</div> <div><input type="radio"/> Unemployed</div> <div><input type="radio"/> Student</div>		
<div><div>Your Present Employer</div><div>Phone</div></div> <div></div>			
Address Information	Address Line 1		
	Address Line 2		
	City	State	ZIP Code
<div>Gross Monthly Salary</div> <div></div>		<div>Your Position</div> <div></div>	<div>Years There</div> <div></div>
<div></div> <div>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.</div>			
<div>Other Monthly Income</div> <div></div>		<div>Source of Other Income</div> <div></div>	
<div>Previous Employer (if less than 3 years at current employer)</div> <div></div>		<div>Years at Previous Employer</div> <div></div>	
Address Information	Address Line 1		
	Address Line 2		
	City	State	ZIP Code
Co-Applicant Additional Information			
<div>Your Checking Account Number</div> <div></div>		<div>Institution Name</div> <div></div>	
<div>Your Savings Account Number</div> <div></div>		<div>Institution Name</div> <div></div>	

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 **Stoughton Co-Operative 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 **Stoughton Co-Operative 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 **Stoughton Co-Operative Bank** at any time. I acknowledge that this application is subject to approval of credit and acceptance by **Stoughton Co-Operative Bank**. Should my request for credit and subsequent loan be approved, I agree to give **Stoughton Co-Operative 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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Purchase & Sale Agreement, Paystubs or Other Documentation	Please submit this information as an additional attachment.
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