Auto or Recreational Vehicle Loan Application

First Name:		Last Name:		
Submitted on:	Submitted on:			
Preferred branch you would like to handle your loan request:				
Important Information about Procedures for Opening a New Account 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. Gather the documents needed to apply for the loan online. • Valid Drivers License & Current Paystubs for all applicants 2. Complete application online and click "Submit Application"				
 To safeguard your privacy, QUIT your browser and restart it again after using this form. This loan application 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. 				
Amount Dominated	LC	an Information		
Amount Requested:				
Purpose of Loan Request:				
Description of Collateral Offered: (required) Loans available for vehicles 2015 or newer. For loan inquiries on collateral older than 2015, please contact a branch.	Year:	Make:	Model:	
Term Requested: (required) *Terms available depend on the type and age of collateral*	 12 mo. 24 mo. 36 mo. 48 mo. 60 mo. 72 mo. (Term available for No. 	New Vehicles Only)		
Are you applying as an individual or with a co- applicant as a joint application? (required)	O Individual O Joint			
Applicant Information				
First Name:	Middle Initia	l: Last Nar	ne: Suffix:	

Date of Birth:	Birth: Social Security No.: Email Address:		mail Address:		
Primary Phone	e: Se	econdary Phone:	Best	Time to Call:	
Driver's License Information:	Driver's License No.:	State Issued:	Issued Date:	Expiration Date:	
Upload front & back of license <i>(required)</i>	Please submit this information	as an additional attachmo	ent.		
Citizenship: (required)	 U.S. Citizen Permanent Resident Alie 	n			
	Non-Resident Alien	cant Housing Information			
(required)	Address Line 1 Address Line 2 City	State	ZIP Code		
Do you currently: (required)	Own Rent Other				
If own: (required)	Estimated Property Value:	Annual Property Tax An	nount: Annual Home	owner Insurance Amount:	
At Current Address Since (mm/yyyy): Monthly Rent or Mortgage Payment:					
Applicant Employment Information					
Current Employment Status: (required)	 Employed Unemployed Self-Employed Retired 				
	Current Employer Nan	ne:		Phone:	

	Address Line 1				
Address Information (required)	Address Line 2				
	City	State	ZIP Code		
Gross Monthly	Salary:	Your Position:	Years at Curre	nt Employer:	
Upload most recent pay stubs or proof of income documentation here <i>(required)</i>	Please submit this information	on as an additional at	achment.		
Applicant Other Income					
You do not have to list alimo granting and repayment of the		maintenance income	unless you want us to conside	er it for the purpose of	
Other Income (required) If completing this section, include proof of income in upload sections.	Monthly Amo	unt:	Source of Other	Income:	
Additional income (second job) (required) If completing this section, include pay stubs in upload section.	Name of Employer:	Position:	Gross Monthly Income:	Years at this job:	
	Co-Appli	cant Information (if ap	oplicable)		
First Name: Middle Initial: Last Name: Suffix:					
Date of Birth: Social Security Number: Email Address		Email Address:			
Primary Phone: Secondary Phone:		Best	Time to Call:		
Driver's License Information:	Driver's License No:	State Issued:	Issued Date:	Expiration Date:	
Upload front & back of license	Please submit this information	on as an additional at	achment.		
Citizenship:	O U.S. Citizen O Permanent Resident Al	ien			
	O Non-Resident Alien		erent from applicant)		

	Address Line 1			
	Address Line 2			
	City	State	ZIP Code	
	O Own			
Do you currently:	O Rent			
	O Other			
If own: (required)	Estimated Property Value:	Annual Property Tax Amount:	Annual Homeowner Insurance Amount:	
At Current Address Since (mm/yyyy): Monthly Rent or Mortgage Payment:				
	Co-Annlic	ant Employment Information		
Current Employment	O Unemployed			
Current Employment Status:	◯ Self-Employed			
	Retired			
	Current Employer Nan	ne:	Phone:	
	Address Line 1			
Address Information	Address Line 2			
	City	State	ZIP Code	
Gross Monthly	Salary: Yo	our Position:	Years at Current Employer:	
Upload most recent pay stubs or proof of income documentation here	Please submit this information	as an additional attachment.		
Co-Applicant Other Income				
You do not have to list alimor granting and repayment of th		aintenance income unless you wa	ant us to consider it for the purpose of	
Other Income (required) If completing this section, include proof of income in upload sections.	Monthly Amoun	t:	Source of Other Income:	

Additional Income (second job) (required) If completing this section, include pay stubs in upload section.	Name of Employer:	Position:	Gross Monthly Income:	Years at this Job:
		Deposit Accoun	ts	
Last 4 digits of your Primary Checking account number:			Name of Bank:	Approx. Balance:
Last 4 digits o	f your Primary Savings accou	nt number:	Name of Bank:	Approx. Balance:
checking or savings account			atically deduct payments from a l	
loan is paid in full. I understa	and the Bank reserves the righ	nt to terminate the	automatic repayment plan without the interest rate will increase 0.2	ut notice.
Do you want your monthly payment automatically deducted from your Mercer County State Bank deposit account? (required)	O Yes O No			
If yes, please provide deposit account number:				
State Bank ("Bank") to make including obtaining my credit	whatever inquiries about me reports and contacting my en	deemed necessa nployer. I also aut	nt(s) is true, correct and complete ry and appropriate for the purpos horize the Bank to provide credit to provide any further information	e of evaluating my credit, information about its credit

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O I/We agree with the above statement

Thank you for your loan request. Please click "Submit Form" below to start the loan process. A loan officer from Mercer County State Bank will reach out within two business days with a decision or to review any additional information needed for your request. If you have any questions regarding your application, please reach out to your preferred local branch.