

You Can Enter A Slogan Here OK

Member FDIC | Equal Housing Lender <u>Privacy Statement</u>

Debt Consolidation Loan Application

First Names		Look Name	
First Name:		Last Name:	
Submitted on:			
Applicants must reside in 0	County, State. ut Procedures for Opening a New A		
law requires all financial in What this means for you: Vallow us to identify you. We Security Notice:	stitutions to obtain, verify, and record When you open an account, we will e may also ask to see your driver's	ent fight the funding of terrorism and r rd information that identifies each pers ask for your name, address, date of b license or other identifying documents rowser with the latest security enhance	son who opens an account. wirth, and other information that will s.
Instructions: 1. Print this loan applicatio 2. Complete application on		ed in your computer's memory) when need. or fax it to 336-644-6644.	
	gather the information you will need	ended for commercial use. A valid soo before completing this form. Upon re d	
	Debt Cons	solidation Loan Request	
Amount Requested:			
Type of Application:	O Individual Applicant O Joint Applicant		
		Applicant	
(required)	First Name	Middle Initial	Last Name
(required)	Date of Birth	Social Security No.	No. of Dependents
(required)	Driver's License No.	Driver's License State	Your E-mail Address

(required)	Home Phone	Best Time To Call	Work Phone
Are there any unsatisfied Judgments against you?	○ Yes ○ No		
Have you been declared bankrupt in the last 7 years?			
	Re	esidence	
Your Primary Residence:	Own with Mortgage Own Clear		
	Rent Other		
Present Street Address	Address Line 1 Address Line 2	State	ZID Codo
	City	State	ZIP Code
(required)	Years At Present Address	Your Monthly	∕ Rent or Mortgage Payment
(required)	Years At Previous Ac	Idress	Your Previous Address
	Home	Information	
(required)		dress (If different from above)	Date Purchased
(required)	Current Mortgage Ho	lder	Mortgage Holder Phone
(required)	Purchase Price	Market Value	Mortgage Balance
	Em	ployment	

	○ Employed	
	○ Self-Employed	
	○ Unemployed	
	Retired	
	◯ Student	
(required)	Your Present Employer	Phone
	Address Line 1	
Address Information	Address Line 2	
	City State	ZIP Code
(required)	Gross Monthly Salary Your Pos	iton Years There
You do not have to list alimogranting and repayment of the (required)	ony, child support or separate maintenance income unless you wan his credit request. Other Monthly Income	Source of Other Income
(required)	Previous Employer (if less than 3 years at current employe	r) Years at Previous Employer
(required)		r) Years at Previous Employer
	Address Line 1	r) Years at Previous Employer
(required) Address Information	Address Line 1 Address Line 2	
	Address Line 1 Address Line 2 City State	Years at Previous Employer ZIP Code
	Address Line 1 Address Line 2	
Address Information	Address Line 1 Address Line 2 City State Additional Information	ZIP Code

	Name of Creditor	Approx. Balance	Monthly Payment	Collateral, if any
(required)				
(required)				
Total Amount of Other Monthly Payments not listed above:				
(required)	Assets	Value	Title I	Held Name
		Co-Applicant		
(required)	First Name	Middle	e Initial	Last Name
(required)	Date of Birth	Social Security	No	No. of Dependents
(required)	Driver's License No.	Driver's Lic	ense State	Your E-mail Address
(required)	Home Phone	Best Tin	ne To Call	Work Phone
	Co	p-Applicant Residence		
	Own with Mortgage			
Your Primary Residence:	Own Clear			
	Rent			
	Other			
	Address Line 1			
Present Street Address	Address Line 2			
	City	State	ZIP Coo	le
(required)	Years At Present Add	dress	Your Monthly Rent or M	lortgage Payment

(required)	Years At Previous Address		Your Previous Address	
	Co-Applicant	Home Information		
(required)	Collateral Property Address (If different from above)		Date Purchas	sed
(required)	Current Mortgage Holder		Mortgage Holder Phone	
(required)	Purchase Price	Market Value	Mortgage Balance	
	Co-Applica	nt Employment		
	EmployedSelf-EmployedUnemployedRetired			
	O Student			
(required)	Your Present Employer		Phone	
Address Information	Address Line 1 Address Line 2 City	State	ZIP Code	
(required)	Gross Monthly Salary	Your Posito	on Years There	•
You do not have to list alimo	ony, child support or separate maintenants	ance income unless you want	us to consider it for the purpose	es of
(required)	Other Monthly Income		Source of Other Income	

equired)	Previous Employer (i	f less than 3 years at currer	nt employer) Year	s at Previous Employe	
	Address Line 1				
dress Information	Address Line 2				
	City	State	ZIP Code		
	Co-A	pplicant Additional Informat	ion		
quired)	Your Che	ecking Account Number	I	Institution Name	
quired)	Your Savings Account Number.			Institution Name	
	Name of Creditor	Approx. Balance	Monthly Payment	Collateral, if any	
quired)					
ral Amount of Other nthly Payments not ed above:					
juired)	Assets	Assets Value Title Held Name		ld Name	

This section to be completed only for loans subject to reporting under the Home Mortgage Disclosure Act (HMDA).

HMDA loans are loans made for the following purposes: Home Purchase (secured), Home Improvement (secured or unsecured), or refinance of a loan secured by a 1-4 residential dwelling (regardless of purpose).

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 discriminate neither on the basis of this information, nor on whether you choose to furnish it.

If you choose to furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this Lender is required to note the information on the basis of visual observation or surname.

If you do not wish to furnish the above information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for.)

	I do not wish to furnish this information.
	O Hispanic or Latino
Ethnicity	Not Hispanic or Latino
	American Indian, Alaskan Native
Race or National Origin:	Native Hawaiian or other Pacific Islander
rade of rational origin.	White
	Black or African American
Sex	○ Male
COX	○ Female
	Co-Applicant:
	I do not wish to furnish this information.
Ethnicity	O Hispanic or Latino
Lamony	Not Hispanic or Latino
	American Indian, Alaskan Native
	O Asian
Race or National Origin:	Native Hawaiian or other Pacific Islander
Ü	White
	Black or African American
Sex	O Male
	○ Female
Applicant(s) Statement	
	quest for credit in consideration of BankName lending to me and/or others upon my guarantee. I/We certify d herein is accurate and complete to the best of my knowledge.
	o retain property of this application, to rely on the foregoing, to check and verify my credit, employment and by up credit reports concerning my credit worthiness and to exchange information about my account with d credit bureaus.
at any time. I acknowledge the credit and subsequent loan be	esent and future), bank and other references listed above to release and/or verify information to BankName hat this application is subject to approval of credit and acceptance by BankName . Should my request for be approved, I agree to give BankName written notice immediately upon change of my name, address, rtinent information contained herein.
(required)	I/We AGREE with the above statement