



Member FDIC | Equal Housing Lender

[Privacy Policy](#)

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.

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 715-394-2791.
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

Desired Monthly Payment

or Term Requested:

- ☐ 24 mos.
☐ 36 mos.

☐ 48 mos.
☐ 60 mos.

☐ 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 rate or 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		
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
<div></div>	<div></div>

Previous Employer (if less than 3 years at current employer)	Years at Previous Employer
<div></div>	<div></div>

Address Information	Address Line 1		
	Address Line 2		
	City	State	ZIP Code
<div></div>	<div></div>	<div></div>	<div></div>

Additional Information

Your Checking Account Number	Institution Name
<div></div>	<div></div>

Your Savings Account Number	Institution Name
<div></div>	<div></div>

Name of Creditor	Approx. Balance	Monthly Payment	Collateral, if any
<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>

Total Amount of Other Monthly Payments not listed above:	<div></div>
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Assets	Value	Title Held Name
<div></div>	<div></div>	<div></div>

Co-Applicant

First Name	Middle Initial	Last Name
<div></div>	<div></div>	<div></div>

Date of Birth	Social Security No.	No. of Dependents
<div></div>	<div></div>	<div></div>

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>_____</div> <div>Address Line 2</div> <div>_____</div> <div>CityStateZIP Code</div> <div>_____ _____ _____</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>			

Your Present Employer		Phone	
Address Information	Address Line 1		
	Address Line 2		
	City	State	ZIP Code
Gross Monthly Salary		Your Position	Years There
—			
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
Co-Applicant 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:

Assets

Value

Title Held Name

Applicant(s) Statement

Applicant(s) Statement

I/We have completed this request for credit in consideration of Superior Savings 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 Superior 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 Superior Savings Bank at any time. I acknowledge that this application is subject to approval of credit and acceptance by Superior Savings Bank. Should my request for credit and subsequent loan be approved, I agree to give Superior 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 statement