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| <p>NOTICE: Married applicants may apply for individual credit. Indicate the type of credit you are applying for below:</p> <p><input type="checkbox"/> Individual Credit: 1) Complete applicant section if you are relying on your own income and assets to establish credit. 2) Complete other application section providing information about your spouse or former spouse if you are relying on alimony, child support, or separate maintenance payments to establish credit.</p> <p><input type="checkbox"/> Joint Credit: By initialing we certify that we are applying for joint credit. <u> </u> <u> </u> (initials) (initials) Complete applicant and co-applicant section, providing information about you and the other party.</p> | <p>AMOUNT REQUESTED \$</p> <hr/> <p>TERM REQUESTED (MOs)</p> |
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| APPLICANT | | | | |
|--|--|--|---|----------------------|
| FULL NAME (LAST, FIRST, MIDDLE) | HOME PHONE | WORK PHONE | SS# | BIRTHDATE |
| <input type="checkbox"/> COMPLETE FOR JOINT CREDIT OR SECURED CREDIT <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (SINGLE, DIVORCED, WIDOWED) | | | E-MAIL ADDRESS | |
| PRESENT STREET ADDRESS | | CITY AND STATE | ZIP | YEARS THERE? |
| PRESENT EMPLOYER AND ADDRESS | | POSITION/TITLE | YEARS THERE? | GROSS MONTHLY SALARY |
| OTHER INCOME/SOURCE (DESCRIBE) NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED | | | | NO. OF DEPENDENTS |
| COUNTY OF RESIDENCE | HAVE YOU EVER APPLIED TO US FOR CREDIT BEFORE? | YES <input type="checkbox"/> NO <input type="checkbox"/> | NAME OF CURRENT FINANCIAL INSTITUTION(S): | |
| NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | RELATIONSHIP | | PHONE NO (Include Area Code) | |

| CO-APPLICANT | | | | |
|--|------------|----------------|----------------|----------------------|
| FULL NAME (LAST, FIRST, MIDDLE) | HOME PHONE | WORK PHONE | SS# | BIRTHDATE |
| <input type="checkbox"/> COMPLETE FOR JOINT CREDIT OR SECURED CREDIT <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (SINGLE, DIVORCED, WIDOWED) | | | E-MAIL ADDRESS | |
| PRESENT STREET ADDRESS | | CITY AND STATE | ZIP | YEARS THERE? |
| PRESENT EMPLOYER AND ADDRESS | | POSITION/TITLE | YEARS THERE? | GROSS MONTHLY SALARY |
| OTHER INCOME/SOURCE (DESCRIBE) NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED | | | | NO. OF DEPENDENTS |
| COUNTY OF RESIDENCE | | | | |

| DEBTS | | | |
|----------------------------|---------|-----------------|-------------------|
| DESCRIPTION/CREDITOR | BALANCE | MONTHLY PAYMENT | APPROXIMATE VALUE |
| MORTGAGE - | \$ | \$ | \$ |
| 2 ND MORTGAGE - | \$ | \$ | \$ |
| AUTO - | \$ | \$ | \$ |
| CREDIT CARD - | \$ | \$ | \$ |
| OTHER - | \$ | \$ | \$ |

| INFORMATION FOR GOVERNMENT MONITORING PURPOSES | |
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| 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 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 on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under Federal regulations the Lender is required to note race or national origin and sex on the basis of visual observation of surname. If you do not wish to furnish the above information, please check the box below. | |
| APPLICANT <input type="checkbox"/> I do not wish to furnish this information. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | CO-APPLICANT <input type="checkbox"/> I do not wish to furnish this information. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female |
| ETHNICITY: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino | ETHNICITY: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino |
| Race or National Origin: <input type="checkbox"/> American Indian or Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Nat. Hawaiian/Pac. Islander <input type="checkbox"/> White | Race or National Origin: <input type="checkbox"/> American Indian or Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Nat. Hawaiian/Pac. Islander <input type="checkbox"/> White |

SIGNATURES

Everything that I/we have stated in this application is correct to the best of my/our knowledge. I/we understand that you will retain this application whether or not it is approved. You are authorized to check my/our credit and employment history and to answer questions about your credit experience with me/us

SIGNATURE OF APPLICANT
DATE
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SIGNATURE OF JOINT APPLICANT
DATE