

SHORT FORM CREDIT APPLICATION

Date of Application _____

To Creditor: _____

1. **APPLICANT(S)**. You may apply for individual or joint credit. Applicants should complete Applicant Column; Joint-Applicant(s), if any, should complete Joint Applicant Column or complete a separate application.

2. **LOAN** Amount requested \$ _____ Purpose _____
 Collateral offered Yes No. If yes, describe collateral * _____
 Owner(s) of collateral _____
 Interest rate: _____ No. of Months: _____ Type: _____

Applicant			APPLICANT INFORMATION			Joint Applicant		
Applicant Name			Joint Applicant Name					
Dependents No. Ages			Dependents (not listed by Applicant) No. Ages					
Social Security Number	Date of Birth	Driver's License (or <input type="checkbox"/> State ID Card) No.	Social Security Number	Date of Birth	Driver's License (or <input type="checkbox"/> State ID Card) No.			
Driver's License (or <input type="checkbox"/> State ID Card) Name			Driver's License (or <input type="checkbox"/> State ID Card) Name					
Expiration Date			Expiration Date					
State			State					
Changed Name on Driver's License or State ID Card in Past 5 Years <input type="checkbox"/> No <input type="checkbox"/> Yes, and give Prior Name _____			Changed Name on Driver's License or State ID Card in Past 5 Years <input type="checkbox"/> No <input type="checkbox"/> Yes, and give Prior Name _____					
Home Phone	Cell Phone	E-Mail Address	Home Phone	Cell Phone	E-Mail Address			
Present Address (Street, City, State & ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.			Present Address (Street, City, State & ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.					
Previous Address (Street, City, State & ZIP) _____ No. Yrs.			Previous Address (Street, City, State & ZIP) _____ No. Yrs.					

EMPLOYMENT INFORMATION							
Name & Address of Employer		<input type="checkbox"/> Self Employed	Yrs. on this job	Name & Address of Employer		<input type="checkbox"/> Self Employed	Yrs. on this job
			Gross Monthly Income \$				Gross Monthly Income \$
Position			Business Phone	Position			Business Phone
Name of Previous Employer		<input type="checkbox"/> Self Employed	Yrs. on this job	Name of Previous Employer		<input type="checkbox"/> Self Employed	Yrs. on this job

OTHER INCOME - Except alimony, child support and maintenance
 (Need not reveal income from medical insurance, disability or wage continuation insurance if applicant(s) does not choose to have such income considered as a basis for repaying this obligation).

Gross Monthly Income	Applicant	Joint Applicant	Total	Describe Other Income Source	Monthly Amount
Overtime	\$	\$	\$	Applicant	\$
Bonuses				Applicant	
Commissions				Joint Applicant	
Dividends/Interest				Joint Applicant	
Net Rental Income					
Other (complete section to the right to describe)					
Total (incl. base employment)	\$	\$	\$		

INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE PAYMENTS
 (Need not be revealed if applicant(s) does not choose to have it considered as a basis for repaying this obligation).

Kind of Income	Name of Payor	Kind of Income	Name of Payor
Amount per Month	Ends	Amt. Past Due	Amount per Month
\$		\$	\$
			Amt. Past Due
			\$

Is any listed income likely to be reduced before the credit requested is paid off?
 No Yes (Explain in detail on separate sheet)

Name and Address of nearest relative not living with you _____

Assets					
Assets	Amount	Assets	Amount	Assets	Amount
Accounts in Banks	\$	Real Estate Owned	\$	Other Assets	\$
Stocks & Bonds	\$	Retirement Funds	\$		
Life Insurance (Face Value)	\$	Automobiles	\$	Total Assets	\$

*This is not a complete or final description of collateral.

**LIST ALL DEBTS AND OBLIGATIONS OF PERSONS IDENTIFIED IN APPLICANT AND JOINT APPLICANT COLUMNS.
(Use continuation sheet to list any additional liabilities.)**

Liabilities and Pledged Assets. List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet if necessary. Indicate by (*) those liabilities which will be satisfied or paid in full upon the granting of the extension of credit to which this application relates.

LIABILITIES	Monthly Payment & Months Left to Pay	Unpaid Balance	Credit Limit	Debtor
Name and Address of Creditor Acct. no.	\$ Payment/Months	\$	\$	<input type="checkbox"/> APPLICANT <input type="checkbox"/> JOINT APPLICANT
Name and Address of Creditor Acct. no.	\$ Payment/Months	\$	\$	<input type="checkbox"/> APPLICANT <input type="checkbox"/> JOINT APPLICANT
Name and Address of Creditor Acct. no.	\$ Payment/Months	\$	\$	<input type="checkbox"/> APPLICANT <input type="checkbox"/> JOINT APPLICANT
Name and Address of Creditor Acct. no.	\$ Payment/Months	\$	\$	<input type="checkbox"/> APPLICANT <input type="checkbox"/> JOINT APPLICANT
Name and Address of Creditor Acct. no.	\$ Payment/Months	\$	\$	<input type="checkbox"/> APPLICANT <input type="checkbox"/> JOINT APPLICANT
Name and Address of Creditor Acct. no.	\$ Payment/Months	\$	\$	<input type="checkbox"/> APPLICANT <input type="checkbox"/> JOINT APPLICANT
Name and Address of Creditor Acct. no.	\$ Payment/Months	\$	\$	<input type="checkbox"/> APPLICANT <input type="checkbox"/> JOINT APPLICANT
Alimony/Child Support/Separate Maintenance Payments Owed to:	\$	When Payments Due	Ends	Amt. Past Due \$
TOTAL MONTHLY PAYMENTS ▶	\$			

NOTICE: We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

For the purpose of obtaining the credit described above, and any future credit granted to the undersigned by the creditor named above, the undersigned, jointly and severally, (1) represent that the above statements are true and complete, (2) authorize the creditor named above, or its agents, to verify them and obtain additional information concerning our credit, employment history or any other information, including credit reports (although the creditor may rely on these statements without any further verification), to furnish, to the extent not prohibited by applicable law, credit experience with me to others, and to answer any questions about our credit experience and other financial relationships with the creditor, and (3) agree to the provisions of any rules, regulations or agreements of the creditor governing such credit. This application is creditor's property.

The undersigned understand that it may be a crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts.

**IMPORTANT INFORMATION ABOUT
PROCEDURES FOR OBTAINING CREDIT**

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 obtains credit.

What this means for you: When you obtain credit, 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.

Applicant Sign Here _____ Date _____

Joint-Applicant Sign Here _____ Date _____
(joint credit only)

To be Completed by Interviewer:

This information was provided:

- In a face-to-face interview
- In a telephone interview
- By the applicant and submitted by fax or mail
- By the applicant and submitted via e-mail or the Internet

Application received for Creditor by _____

Loan Originator's Signature X		Date
Loan Originator's Name (print or type)	Loan Originator NMLSR ID	Loan Originator's Phone Number (including area code)
Loan Originator Organization's Name	Loan Originator Organization NMLSR ID	Loan Originator Organization's Address