

CREDIT APPLICATION IMPORTANT APPLICATION INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one ore more forms of identification to fulfill the requirement. In some instances we may use outside sources to confirm information. The information you provide is protected by our privacy policy and federal law. TYPE OF CREDIT REQUESTED ☐ Unsecured ☐ INDIVIDUAL CREDIT - Relying solely on my income or assets ☐ Secured JOINT CREDIT - We intend to apply for joint credit (Please initial if Joint Application) Applicant ___ Joint Applicant _ AMOUNT REQUESTED TERM (Months) PAYMENT DATE REQUESTED Proceeds of Loan to be used for: Description of Collateral (Year, Make, Model) **APPLICANT - PLEASE TELL US ABOUT YOURSELF** First Name Last Name Social Security Number Date of Birth Present Street Address City/State Zip Code How Long? Previous Street Address (if present address less than 3 years) City/State Zip Code How Long? Mobile Phone E-mail Address Home Phone Nearest Relative NOT Living with you: Last Name Relationship Home or Mobile Phone First Name Street Address City Zip Code State PLEASE TELL US ABOUT YOUR JOB Present Employer Position How Long? City/State Employer's Phone Employer's Street Address Zip Code IF SELF EMPLOYED, PROVIDE LAST YEAR'S TAX RETURN AND LIST NAME OF BUSINESS, IF RETIRED, PLEASE LIST PREVIOUS EMPLOYER Previous Employer (if current employer less than 3 years) How Long? PLEASE PROVIDE SOME FINANCIAL INFORMATION revealed if you do not wish to have it considered as a basis for repayment of credit requeste Source of Additional Income (1) Source of Additional Income (2) Monthly Gross Salary Additional Income (1) Additional Income (2) Monthly Rent or Mortgage Rent Lives with parents Pavable to: Monthly Auto Payment (Year, Make or Model) ☐ Other Bank Name (Checking) Account Number Bank Name (Savings) JOINT APPLICANT OR OTHER PARTY- PLEASE TELL US ABOUT YOURSELF Complete ONLY if joint credit or income from Other Party is to be considered. First Name Last Name Social Security Number Date of Birth City/State Present Street Address Zip Code How Long? Previous Street Address (if present address less than 3 years) City/State Zip Code How Long? Home Phone Mobile Phone E-mail Address Relationship to applicant? PLEASE TELL US ABOUT YOUR JOB Present Employer How Long? Employer's Phone Employer's Street Address City/State Zip Code IF SELF EMPLOYED, PROVIDE LAST YEAR'S TAX RETURN AND LIST NAME OF BUSINESS, IF RETIRED, PLEASE LIST PREVIOUS EMPLOYER Previous Employer (if current employer less than 3 years) How Long? Position PLEASE PROVIDE SOME FINANCIAL INFORMATION Alimony, Child Support, or Separate Maintenance income need not be Maintenance income need not be revealed if you do not wish to have it considered as a basis for repayment of credit requested Monthly Gross Salary Additional Income (1) Additional Income (2) Source of Additional Income (1) Source of Additional Income (2) Monthly Rent or Mortgage Rent ■ Lives with parents Payable to: Monthly Auto Payment (Year, Make or Model) Own ☐ Other Bank Name (Checking) Account Number Bank Name (Savings)

I certify that everything I have stated in this application and on any attachments is correct. You may keep application whether or not it is approved. By signing below I authorized you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update my credit information at your request if my financial condition changes.

Applicant's Signature	Date	Co-Applicant's S

Co-Applicant's Signature (where applicable)	Date