## **CONSUMER LOAN APPLICATION**

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT																
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 his means for your When you open an account, we will ask for your name, address, date of high, and other information that will allow us to identify you. We may also ask to see your																
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.																
TO: Name/Address of Lender						l w	What type of credit are you requesting? (Please check appropriate box:)  SECURED UNSECURED OPEN-END LINE CLOSED-END									
						SECURED UNSECURED OPEN-END LINE CLOSED-END OF CREDIT TERM LOAN INDIVIDUAL (Own income or assets)							LOAN			
							IN	INDIVIDUAL (Own income or assets plus income or assets from other sources)					rces)			
							JOINT (please initial) COSIGNER									
Loan Amount Interest Rate Term						Payment Purpose										
LOAN ORIGINATION COMPANY NAME:									LO	OAN ORIGIN	ATION COM	PANY IDENT	IFIER	:		
LOAN ORIGINATOR NAME: LOAN ORIGINATOR LICENSE NUMBER:																
APPLICANT/COSIGNER INFORMATION  (A) (Suffix) Taylogue ID Number (SSN/TIN) Date of Diet.																
Name (Last) (First) (MI) (Suffix) Taxpayer ID Number (SSN/TIN) Date of Birth																
Street Address							Driver's License/ID Number State				Home	Home Phone Number				
City State ZIP Code							County How Long There No. of Dependents Ag						Age of Dependents			
Previous Address (if less than 2 years at current address)																
Employer Address Phone Number																
Position			How Lo	ona .												
				9		How	Gros		al.		Weekly Monthly \$  Average Monthly Overtime Pay \$					
Previous Employer		Α	ddress			1	low Often Paid				Position				w Long	
Nearest Relative Not Living With You											Relationship					
											, relationallib					
Address							City State			tate		ZIP Code			Relativ	e's Phone Number
Present Mortgage Holder/Landlord															Phone	Number
Own Rent		Monthly	Payment \$	\$												
Immigration Status U.S. Citizen	Perm. F	Resident of U	ı.s. 🔲 o	Other:												
Marital Status: Do not complete if this state for repayment of the			al unsecure	ad cred	dit unle	ss resp	ondir	ng party resid	des	in a comm	unity proper	ty state or i	s rely	ing on p	roperty	located in such a
Married	Separate		Unmarri	ed (inc	luding	single,	divor	ced, and wid	dow	red)						
Other Income: Amount \$			requency		P. 1					Source						.,
Alimony, Child Support, Separate Maint on income from alimony, child support,														nents. H	lowever	, if you are relying
Payment Received Pursuant to:  Alimony per Month \$	Court Order	ш	Written Agi				Ora	l Understand	-		intenance P	avment per	Month	n \$		
						CANT	INF	ORMATIC		<u> </u>				•		
Name (Last)		(First)				1)	/II)	(Suffix)		Taxpayer II	D Number (S	SSN/TIN)		Date of	f Birth	
Street Address							Driver's License/ID Number State Home P					Phone N	Number			
City	State			ZIP C	Code		County How			How Lon	g There No. of Dependents Age of D			Age of Dependents		
Previous Address (if less than 2 years a	t current add	(ress)														
Employer			Address	5										Phor	ne Numb	er
Position How Long					Gross Net Weekly Monthly \$											
Previous Employer		Α	Address			How	Ofte	n Paid			Averag	Position	Overti	me Pay	\$	How Long
Nearest Relative Not Living With You											Relationshi	ip				
Address						City State				ZIP Code			Relative's Phone Number			
Present Mortgage Holder/Landlord											Phone Number					
Own Rent Monthly Payment \$																
Immigration Status U.S. Citizen Perm. Resident of U.S. Other:																
Marital Status: Married Separated Unmarried (including single, divorced, and widowed)																
Other Income: Amount \$ Frequency Source																
Alimony, Child Support, Separate Maintenance Payments: You are not required to disclose income from alimony, child support, or separate maintenance payments. However, if you are relying on income from alimony, child support, or separate maintenance payments as a basis for repayment of this obligation, please complete the information below.  Payment Received Pursuant to:  Court Order  Written Agreement  Oral Understanding																
Payment Received Pursuant to:  Alimony per Month \$																
				ADE	OITIO	NAL	INFO	DRMATIO	N							
If you, a joint applicant, or other party an Are you a guarantor or co-maker of any I					ions, pl		<b>xplai</b> n		e pro		Applicant/Otl	her Party:		Yes	N	0
Are there any suits or judgments pending	g against you	?	Applican	nt:	Ye	es [	N	lo		Joint A	Applicant/Otl	her Party:		Yes	N	0
Have you been declared bankrupt in the	last 10 years	?	Applican	nt:	Υe	es		lo		Joint A	Applicant/Otl	her Party:		Yes	Пи	0

COLLATERAL INFORMATION												
Collateral to Secure Account: The description should include make, year, length, loan value, selling price, existing liens, serial numbers, name(s) of titleholder(s), legal description, license or registration numbers, etc., as may be applicable.												
CURRENT ASSETS												
Please attach additional sheet(s) if more space is required for the Current Assets section.  DESCRIPTION OF ASSET  OWNER NAME(S)  SUBJECT TO LIEN: YES/NO  VALUE												
DESCRIPTION OF ASSET				AME(O)	0000111	J LILIN. 120/110	1					
Fotal Assats	from Addendum											
OTAL ASS												
			OUTSTANI	DING DEBTS								
	ng are all of the loans or debts you present ou are obligated to make. Please attach a				cards, rents, mortgage	es, alimony, ch	ild support, and sep	arate maintenance				
	column (Applicant Code) to indicate whet		-		ant (C), or Joint Applic	ants (J).						
APPLICANT CODE	NAME OF CREDITOR	ACCOUNT NUMBER		ORIGINAL AMOUNT	CURRENT BALANCE		MONTHLY PAYMENTS	Check box if to be paid from proceeds				
	Total Debts from Addendum											
	TOTAL DEBTS											
(If joint app	lication, read singular pronouns in the plu	al.) I warrant the truth of	the informatio	n contained in this app	olication and that all s	tatements mad	le in this applicatio	n are made for the				
application blank, Lender, its agents, successors, and assigns, may assume the information requested is adverse. I authorize Lender, its agents, successors, assigns, and employees, to investigate and verify all information I provided to Lender, its agents, successors, and assigns. I understand that it is my sole and exclusive responsibility to determine all the tax effects of the loan and acknowledge that Lender, its agents, successors, and assigns, have not provided any tax advice to me. Lender, its agents, successors, and assigns, can give information about my loan to credit reporting agencies and others who may properly receive that information. If Lender approves this application and Lender, its agents, successors, and assigns, are required to report the amount of interest paid on the loan to the Internal Revenue Service, I understand that Lender, its agents, successors, and assigns, will report using the Social Security Number (tax identification number) shown above. I understand that if the Social Security Number is incorrect, that I may be subject to Internal Revenue Service penalties. I understand Lender, its agents, successors, and assigns, will keep this application whether or not my credit request is approved.  Certification: I certify that the information provided in this application is true and correct as of the date set forth opposite my signature on this application and acknowledge my understanding that any intentional or negligent misrepresentations of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq., and liability for monetary damages to the Lender, its agents, successors, assigns, insurers, and any other person who may suffer any loss due to reliance upon any misrepresentation I made in this application or in any other manner.												
Signature o	f Applicant or Cosigner	'	Date	Signature of Co-Appl	iicant			Date				
MILITARY ANNUAL PERCENTAGE RATE STATEMENT  Federal law provides important protections to members of the Armed Forces and their dependents relating to extensions of consumer credit. In general, the cost of consumer credit to a member of the Armed Forces and his or her dependent may not exceed an annual percentage rate of 36 percent. This rate must include, as applicable to the credit transaction or account: the costs associated with credit insurance premiums; fees for ancillary products sold in connection with the credit transaction; any application fee charged (other than certain application fees for specified credit transactions or accounts); and any participation fee charged (other than certain participation fees for a credit card).  Applicants may receive this notice verbally by calling LENDER'S TOLL FREE NUMBER:												
CREDITOR USE ONLY												
Loan Approval (Indicate Conditions of Loan, if Any)												
Date Applic	ation Received Received By			Si	ignature		Amount Re	quested				
Date Applic	ation Completed Approved By						Amount A	pproved				
	tion was taken by: Face-to-Face		Te	elephone Int	ternet							
No C	redit File ficient Number of Credit References Provid		H '	able Type of Credit Ref lit Performance With U		=	to Verify Credit Ref to Verify Employme					
=	ed Credit Experience ction Action or Judgment		H '	y or Irregular Employment Length of Employment		=	to Verify Income					
=	shment or Attachment		봄	nt Length of Employme nt Income for Amount (			to Verify Residence r Type of Collateral					
Foreclosure or Repossession  Delinquent Credit Obligations (past or present with others)			H	Obligations in Relation	•	Unacceptable Appraisal						
=	ruptcy	(3.1.010)	H '	y Residence		=	Unacceptable Leasehold Estate  We Do Not Grant Credit to Any Applicant					
	ber of Recent Inquiries on Credit Bureau Re	port	Insufficiei	nt Length of Residence			Not Grant Credit to Terms and Conditio					
Othe	r - Specify:											
Customer Identification Program (CIP) Record Information (Describe Additional Data Collected Pursuant to Institution's CIP) Applicant/Cosigner:												
, ,												
Appli	cant/Cosigner Information Collected and Vo	erified in Accordance with	CIP (initial)									

Co-Applicant Information Collected and Verified in Accordance with CIP (initial)\_