

NEW LOAN  
 RENEWAL \_\_\_\_\_ TIMES REN.

# CREDIT APPLICATION

LOAN NO. \_\_\_\_\_

**IMPORTANT: Please read these directions before completing this Application, and check (✓) the appropriate box below.**

- If you are applying for individual credit in your own name, and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections A and E. If the requested credit is to be secured, also complete the first part of Section C and Section D.
- If you are applying for joint credit with another person, complete all Sections except D, providing information in B about the joint applicant. If the requested credit is to be secured, then complete Section D. We intend to apply for joint credit. (Applicant) \_\_\_\_\_ (Co-Applicant) \_\_\_\_\_
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections except D to the extent possible, providing information in B about the person on whose alimony, support, or maintenance payments or income or assets you are relying. If the requested credit is to be secured, then complete Section D.

AMOUNT REQUESTED \$ \_\_\_\_\_ PAYMENT DATE DESIRED \_\_\_\_\_ PROCEEDS OF CREDIT TO BE USED FOR \_\_\_\_\_

## SECTION A - INFORMATION REGARDING APPLICANT

FULL NAME (Last, First, Middle)		BIRTH DATE	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	
PRESENT ADDRESS (Street, City, State & Zip)			SUPERVISOR DISTRICT	HOW LONG AT PRESENT ADDRESS	RESIDENTIAL PHONE
PREVIOUS ADDRESS (Street, City, State & Zip)				HOW LONG AT PREVIOUS ADDRESS?	
PRESENT EMPLOYER (Company Name & Address)					
HOW LONG WITH PRESENT EMPLOYER?	YOUR POSITION OR TITLE		NAME OF SUPERVISOR		BUSINESS PHONE Ext.
PREVIOUS EMPLOYER (Company Name & Address)				HOW LONG WITH PREVIOUS EMPLOYER?	
YOUR PRESENT GROSS SALARY OR COMMISSION \$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER	NO. DEPENDENTS	AGES OF DEPENDENTS		
Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME		SOURCE OF REPAYMENT		
Is any income listed in this section likely to be reduced before the credit requested is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain)			DATE OF FINANCIAL STATEMENT		

### REPAYMENT TERMS

Have you ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?	Checking Account No. _____ Where?			
	Savings Account No. _____ Where?			
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE NO. (Include Area Code)	
MY INSURANCE AGENT IS (Name & Address)			INSURANCE REQUIRED <input type="checkbox"/>	INSURANCE NOT REQUIRED <input type="checkbox"/>
Are you a co-maker, endorser, or Guarantor on any Loan or Contract?	<input type="checkbox"/> No <input type="checkbox"/> Yes - For Whom? _____ to Whom?			
Are there any unsatisfied judgments against you?	<input type="checkbox"/> No <input type="checkbox"/> Yes - Amount \$ _____ If "Yes" To Whom Owed?			
Have you been declared bankrupt in the last 14 years?	<input type="checkbox"/> No <input type="checkbox"/> Yes - Where? _____ Year?			

OTHER OBLIGATIONS (For example, liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)

## SECTION B - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheets if necessary.)

FULL NAME (Last, First, Middle)		BIRTH DATE	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	
RELATIONSHIP TO APPLICANT (if Any)	PRESENT ADDRESS (Street, City, State & Zip)		RESIDENTIAL PHONE	HOW LONG AT PRESENT ADDR	
PRESENT EMPLOYER (Company Name & Address)					
HOW LONG WITH PRESENT EMPLOYER?	POSITION OR TITLE		NAME OF SUPERVISOR		BUSINESS PHONE Ext.
PREVIOUS EMPLOYER (Company Name & Address)					
PRESENT GROSS SALARY OR COMMISSION \$ PER	PRESENT NET SALARY OR COMMISSION \$ PER	NO. DEPENDENTS	AGES OF DEPENDENTS	HOW LONG WITH PREVIOUS EMPLOYER?	
Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME				
Is any income listed in this section likely to be reduced before the credit requested is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain)					
Has Joint Applicant or Other Party ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?	Checking Account No. _____ Where?				
	Savings Account No. _____ Where?				
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE NO. (Include Area Code)		
Are you a co-maker, endorser or Guarantor on any Loan or Contract?	<input type="checkbox"/> No <input type="checkbox"/> Yes - For Whom? _____ to Whom?				
Are there any unsatisfied judgments against you?	<input type="checkbox"/> No <input type="checkbox"/> Yes - Amount \$ _____ If "Yes" To Whom Owed?				
Owed? Have you been declared bankrupt in the last 14 years?	<input type="checkbox"/> No <input type="checkbox"/> Yes - Where? _____ Year?				

OTHER OBLIGATIONS (For example, liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)

## SECTION C - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)

APPLICANT  Married  Separated  Unmarried (Including single, divorced, and widowed) OTHER PARTY  Married  Separated  Unmarried (Including single, divorced, and widowed)

### SIGNATURES

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

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ OTHER SIGNATURE: (Where Applicable) \_\_\_\_\_ DATE \_\_\_\_\_

