



# CONSUMER LOAN APPLICATION

We intend to apply for joint credit.

FOR BANK USE ONLY			
BRANCH _____	EMPLOYEE _____		
DATE RECEIVED _____	LOAN NO. _____		
<input type="checkbox"/> WALK-IN	<input type="checkbox"/> FAX	<input type="checkbox"/> TELEPHONE	<input type="checkbox"/> E-MAIL
<input type="checkbox"/> MAIL			
DECISION: <input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> INCOMPLETE	<input type="checkbox"/> COUNTEROFFER
	<input type="checkbox"/> OTHER:		

Applicant Initials \_\_\_\_\_

Co-Applicant Initials \_\_\_\_\_

<b>LOAN TYPE REQUESTED:</b> <input type="checkbox"/> UNSECURED <input type="checkbox"/> UNSECURED HOME IMP <input type="checkbox"/> AUTO <input type="checkbox"/> BOAT/RV <input type="checkbox"/> MOBILE HOME <input type="checkbox"/> CASH RESERVE <input type="checkbox"/> OTHER: _____ TERM _____ YRS	<b>LOAN PURPOSE:</b> <input type="checkbox"/> HOME IMP <input type="checkbox"/> DEBT CONSOLIDATION <input type="checkbox"/> OTHER: _____ <input type="checkbox"/> PURCHASE YR _____ MAKE _____ MODEL _____ ID # _____ SALE PRICE _____ SELLER _____ COLLATERAL OFFERED _____	<b>AMOUNT REQUESTED:</b> <div style="border: 1px solid gray; padding: 2px; font-size: small;">NOTE: RESPA real estate loans require a different application.</div> \$ _____
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## Applicant Information

FIRST NAME		INITIAL	LAST NAME		SOCIAL SECURITY NO.	
Drivers License #	State of Issue	Expiration Date		DATE OF BIRTH		
HOME ADDRESS				CITY	STATE	ZIP
HOME PHONE ( )	<input type="checkbox"/> RENT <input type="checkbox"/> OWN	MORTGAGE/RENT PAYMENT	MORTGAGE LANDLORD		YRS/MONTHS THERE YRS MONTHS	
PREVIOUS ADDRESS (IF LESS THAN 2 YEARS AT ABOVE)			CITY	STATE	ZIP	YRS/MONTHS THERE YRS MONTHS
NAME AND ADDRESS OF EMPLOYER		POSITION	YRS/MONTHS THERE YRS MONTHS		BUSINESS PHONE ( )	GROSS ANNUAL SALARY
NOTE: You do not have to include information about income from alimony, child support or separate maintenance payments, unless you want us to consider this income in connection with this application for credit.				OTHER INCOME: LIST SOURCES AND AMOUNTS		
NAME AND ADDRESS OF PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS AT CURRENT EMPLOYER)				POSITION	YRS/MONTHS THERE YRS MONTHS	
CHECKING ACCOUNT <input type="checkbox"/> YES <input type="checkbox"/> NO	BANK		SAVINGS ACCOUNT <input type="checkbox"/> YES <input type="checkbox"/> NO	BANK		
NAME AND ADDRESS OF CLOSEST RELATIVE NOT LIVING AT YOUR ADDRESS						

## Co-Applicant Information

FIRST NAME		INITIAL	LAST NAME		SOCIAL SECURITY NO.	
Drivers License #	State of Issue	Expiration Date		DATE OF BIRTH		
HOME ADDRESS				CITY	STATE	ZIP
HOME PHONE ( )	<input type="checkbox"/> RENT <input type="checkbox"/> OWN	MORTGAGE/RENT PAYMENT	MORTGAGE LANDLORD		YRS/MONTHS THERE YRS MONTHS	
PREVIOUS ADDRESS (IF LESS THAN 2 YEARS AT ABOVE)			CITY	STATE	ZIP	YRS/MONTHS THERE YRS MONTHS
NAME AND ADDRESS OF EMPLOYER		POSITION	YRS/MONTHS THERE YRS MONTHS		BUSINESS PHONE ( )	GROSS ANNUAL SALARY
NOTE: You do not have to include information about income from alimony, child support or separate maintenance payments, unless you want us to consider this income in connection with this application for credit.				OTHER INCOME: LIST SOURCES AND AMOUNTS		
NAME AND ADDRESS OF PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS AT CURRENT EMPLOYER)				POSITION	YRS/MONTHS THERE YRS MONTHS	
CHECKING ACCOUNT <input type="checkbox"/> YES <input type="checkbox"/> NO	BANK		SAVINGS ACCOUNT <input type="checkbox"/> YES <input type="checkbox"/> NO	BANK		

