

APPLICATION FOR CREDIT

JOINT CREDIT
 INDIVIDUAL CREDIT

By providing us with the information requested below, you grant us the right to use this information for any lawful purpose.

Important Information to Applicant(s): 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 applies for a loan or opens an account.

What This Means for You: When you apply for a loan or 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. In some instances, we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

PLEASE PRINT – READ EACH INSTRUCTION CAREFULLY BEFORE COMPLETING THIS FORM

APPLICANT: First Middle Last			Social Security No.	Date of Birth
Residence Address: Street City State Zip Code				How Long? Yrs Mos
Previous Address: (if less than 2 years) Street City State Zip Code			How Long? _ Yrs _ Mos	No. Dependents
Home Phone:	Cell Phone:	Email Address:		
<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other	Landlord or Mortgage Holder:	If Rent, Landlord Phone:	Rent or Mortgage Payment:	
Employer's Name:		Occupation:	How Long? _ Yrs _ Mos	
Work Phone:	Monthly Income From Employer: NET	*OTHER INCOME: (Read to applicant. "Income from alimony, child support, or separate maintenance need not to be revealed if you do not choose to rely on such income in applying for credit.")		
All Other Monthly Income: NET	Total Monthly Income: NET	Source of Other Income:		
Has applicant taken bankruptcy within the last 7 years? <input type="checkbox"/> Yes, if yes please indicate year taken <input type="checkbox"/> No				
Bank Reference: Name <input type="checkbox"/> Checking <input type="checkbox"/> Saving <input type="checkbox"/> Loan <input type="checkbox"/> Other:				
Personal References: (Relative or Friend) Name Phone Number Relationship				

CO-APPLICANT: First Middle Last			Social Security No.	Date of Birth
Residence Address: Street City State Zip Code				How Long? Yrs Mos
Previous Address: (if less than 2 years) Street City State Zip Code			How Long? _ Yrs _ Mos	No. Dependents

Applicant Initial: _____ **Co-Applicant Initial:** _____

Co-Applicant Continued					
Home Phone:		Cell Phone:		Email Address:	
<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other	Landlord or Mortgage Holder:			If Rent, Landlord Phone:	Mortgage or Rent Payment:
Employer's Name:			Occupation:		How Long? _ Yrs _ Mos
Work Phone:	Monthly Income From Employer: NET		*OTHER INCOME: (Read to applicant. "Income from alimony, child support, or separate maintenance need not to be revealed if you do not choose to rely on such income in applying for credit.")		
All Other Monthly Income: NET		Total Monthly Income: NET		Source of Other Income:	
Has applicant taken bankruptcy within the last 7 years? <input type="checkbox"/> Yes, if yes please indicate year taken <input type="checkbox"/> No					
Bank Reference: Name <input type="checkbox"/> Checking <input type="checkbox"/> Saving <input type="checkbox"/> Loan <input type="checkbox"/> Other:					
Personal References: (Relative or Friend) Name Phone Number					

CERTIFICATIONS, AUTHORIZATIONS AND SIGNATURES

You certify that everything you have stated in this Credit Application and on any other documents submitted to us are true and correct to the best of your knowledge. You understand that you must update the information contained in this Credit Application if either your financial condition materially changes or we make a request to you orally or in writing. You understand that we will retain this Credit Application whether or not it is approved.

You authorize us to request one or more consumer reports, to check and verify your credit and employment history, and to answer questions others may ask us about our credit experience with you.

You authorize us to contact you using any of the telephone numbers listed on this Credit Application or that you subsequently provide us in connection with your credit account – regardless whether the number we use is assigned to a paging service, cellular telephone service, specialized mobile radio service, other radio common carrier service or any other service for which you may be charged for the call. You further authorize us to contact you through the use of voice, text, and email and through the use of prerecorded/artificial voice messages or an automatic dialing device, or any social media such as Facebook, Yahoo, Goggle, Twitter, etc.

Electronic Signature: If check, you further agree that you have signed this Credit Application with one or more electronic signatures. You intend your electronic signature to have the effect of your written ink signature. You viewed and read the entire Credit Application and notices before you signed it. You received a paper copy of this Credit Application after it was signed. You understand that this Credit Application is in the electronic form that we will keep. We may rely on this Credit Application in the electronic form or as a paper version of the electronic form.

 Driver's License No. and State Expiration Date
 (or State ID No.)

 Dealer's Name Phone Number

 Applicant Signature Date

 Joint Applicant, or Other Date
 Party Signature (if applicable)

Notice: It is a federal crime punishable by fine, imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code 1001, *et seq.*

FOR CREDITOR USE ONLY					
Date Received:	Recieved By:	Date Action Taken:	Action Taken By:	Action Taken:	Reason Code(s):