



Date: _____

Important Information when applying for a loan: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, and record information the identifies each person who opens an account. 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.

Section 1 - Individual Information (type or print)		
	Applicant	Spouse
Name:		
Date of Birth:		
Social Security #		
Home Phone:		
Email:		
Address:		
City, State , Zip:		
Country:		
Property:	<input type="checkbox"/> Own <input type="checkbox"/> Rent (Rent per Month:\$)	<input type="checkbox"/> Own <input type="checkbox"/> Rent (Rent per Month:\$)
# of Dependents:		
Age of Dependents:		
Marital Status:	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
Employer's Name:		
Job Position:		
Business Phone:		
Years on Work:		

Section 2 - Monthly Income				
Gross Monthly Income	Applicant	Spouse	Total	Describe Other Income
Base Employment Income	\$	\$	\$	
Overtime	\$	\$	\$	
Commissions	\$	\$	\$	
Dividends/Interest	\$	\$	\$	
NET Rental Income	\$	\$	\$	
Alimony/Child Support	\$	\$	\$	
Other Monthly Income	\$	\$	\$	
Other Monthly Income	\$	\$	\$	
Other Monthly Income	\$	\$	\$	
Total	\$	\$	\$	

Notice: Alimony, child support or separate maintenance income need not be disclosed if the Applicant or Spouse does not wish to have the income considered as a basis for repaying this loan.

Schedule A - Cash, Checking & Savings, CD's

Name of Bank	Account Description/Account Owner	Current Balance
		\$
		\$
		\$
		\$
		\$
Total:		\$

Schedule B - Publicly Traded Investments: Brokerage Firms, Stocks, Bonds, Mutual Funds, IRAs, 401k

Name(s) Registered	Account Description	Shares/Amt	Retirement	Current Value
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
			<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Total:				\$

Schedule C - Other Assets - Vehicles, Boats, Personal Assets, Cash-value Life Insurance Owned by Signer

Property Description	Name(s) Registered In	Current Value
		\$
		\$
		\$
		\$
		\$
Total:		\$

Schedule D - Revolving Credit: Credit Cards, Credit Lines (Do Not Include Home Equity Lines of Credit)

To Whom Payable	Description	Commitment Amt	Monthly Pmt	Current Balance
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Total:				\$

Schedule E - Installment Loans: Cars, Boats, Furniture, Etc.

To Whom Payable	Description	Commitment Amt	Monthly Pmt	Current Balance
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Total:				\$

Schedule F - Other Liabilities: Contract Debts, Lawsuits, Tax Penalties

To Whom Payable	Description	Commitment Amt	Monthly Pmt	Current Balance
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Total:				\$

Section 3 - Financial Condition as of Signed Date

Assets	Amount	Liabilities	Amount
Cash, Checking & Savings, CD's - see Schedule A	\$	Revolving Credit - See Schedule D	\$
Publicly Traded Investments - see Schedule B	\$	Installment Loans - See Schedule E	\$
Other Assets - See Schedule C	\$	Mortgage Loans - See Schedule of Real Estate	\$
Net Worth of Business(es) Owned	\$	Other Liabilities - See Schedule F	\$
Real Estate Owned - See Schedule of Real Estate	\$	Other:	\$
Total Assets:	\$	Total Liabilities:	\$
Net Worth (Total Assets minus Total Liabilities):			\$

Section 4 - General Information

Description	Applicant	Spouse
Have you ever filed bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had property foreclosed upon or given title or deed in lieu thereof?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a party to a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a cosigner or guarantor of any other debt?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently an Executive Officer or on the Board of Directors of any Bank, Thrift, or S&L?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you obligated to pay alimony, child support, or separate maintenance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a US citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a permanent resident alien?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If YES to any of the above, please describe below:

Signatures

The signer(s) certifies that the above statement and attached schedules, including all federal tax returns, prepared by or for the undersigned are a complete and true statement of the financial condition of the undersigned on the date indicated.

Signature (individual):

Date:

Signature (spouse):

Date: