

THIS APPLICATION IS DESIGNED TO BE COMPLETED BY THE APPLICANT. YOU MAY APPLY FOR CREDIT EITHER *INDIVIDUALLY* OR *JOINTLY* WITH A CO-APPLICANT.

- INDIVIDUAL:** 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 Sections 1, 4, and 5. If you are relying on alimony, child support, or separate maintenance payments, complete Section 3a.
- JOINT:** If this is an application for joint credit with another person, complete all sections, providing information in Section 2 about the co-applicant. If you are relying on alimony, child support, or separate maintenance payments, complete Section(s) 3a and/or 3b.

RETAILER		LOCATION		LOAN PURPOSE <input type="checkbox"/> PURCHASE <input type="checkbox"/> REFI <input type="checkbox"/> HOME IMPROVEMENT	
SALESPERSON		PHONE	FAX	IF REFI, <input type="checkbox"/> RATE/TERM <input type="checkbox"/> HOME IMPROVMT <input type="checkbox"/> HOME PURCHASE	
SECTION 1: APPLICANT			SECTION 2: CO-APPLICANT		
NAME First, MI, Last		BIRTH DATE		NAME First, MI, Last	
SOC SEC NO.		MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/>		SOC SEC NO.	
DRIVER'S LICENSE NO.		STATE	DATE ISSUED	DATE EXPIRES	DRIVER'S LICENSE NO.
NUMBER OF DEPENDENT CHILDREN		AGES		NUMBER OF DEPENDENT CHILDREN	
PRESENT STREET ADDRESS			PRESENT STREET ADDRESS		
CITY, STATE, ZIP		HOME PHONE		CITY, STATE, ZIP	
TIME AT PRESENT ADDRESS ____ YRS ____ MOS		<input type="checkbox"/> HOME OWNER	<input type="checkbox"/> RENTER	<input type="checkbox"/> WITH <input type="checkbox"/> RELATIVE	MONTHLY PMT
ARE YOU SELLING YOUR CURRENT HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO			ARE YOU SELLING YOUR CURRENT HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO		
PREVIOUS STREET ADDRESS (IF LESS THAN 2 YRS AT PRESENT)			PREVIOUS STREET ADDRESS (IF LESS THAN 2 YRS AT PRESENT)		
CITY, STATE, ZIP		HOW LONG ____ YRS ____ MOS		CITY, STATE, ZIP	
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP		NAME OF NEAREST RELATIVE NOT LIVING WITH YOU	
CITY, STATE, ZIP		PHONE		CITY, STATE, ZIP	
EMPLOYER <input type="checkbox"/> CHECK IF SELF EMPLOYED		CITY, STATE		EMPLOYER <input type="checkbox"/> CHECK IF SELF EMPLOYED	
PHONE NUMBER	JOB TITLE		HIRE DATE		PHONE NUMBER
GROSS SALARY \$	PER	<input type="checkbox"/> HR	<input type="checkbox"/> WK	<input type="checkbox"/> MO	<input type="checkbox"/> YR
PREVIOUS EMPLOYER		CITY, STATE		PREVIOUS EMPLOYER	
PHONE NUMBER	JOB TITLE		EMPLOYED (MONTH / YEAR) FROM TO		PHONE NUMBER
SECTION 3a: APPLICANT'S OTHER INCOME			SECTION 3b: CO-APPLICANT'S OTHER INCOME		
NOTE: Alimony, child support, or separate income does not need to be revealed unless you want it considered for repayment of this obligation.					
SOURCE		MONTHLY AMOUNT		SOURCE	
SECTION 4: APPLICANT'S CREDIT INFORMATION			Bank Reference <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
SECTION 5: APPLICANT'S OBLIGATIONS					
MORTGAGE <input type="checkbox"/>	LANDLORD <input type="checkbox"/>	OTHER <input type="checkbox"/>	LANDLORD OR MORTGAGE HOLDER NAME	PHONE NUMBER	CURRENT BALANCE \$
LARGEST OTHER OBLIGATION			PHONE NUMBER	CURRENT BALANCE \$	MO PAYMENT \$
ALIMONY / CHILD SUPPORT MAINTENANCE PAYMENT			PHONE NUMBER	CURRENT BALANCE \$	MO PAYMENT \$
I hereby declare that all of the statements made are true and correct. For the purpose of obtaining credit, the creditor is authorized to investigate my credit record, to obtain a credit report, to verify my credit, employment and income reference, to obtain such other information as the creditor deems necessary and to give credit reporting agencies (credit bureaus) and others information regarding the creditor's credit experience with me.					
APPLICANT'S SIGNATURE		DATE	CO-APPLICANT'S SIGNATURE		DATE
					LOAN ORIGINATOR SIGNATURE (if applicable)

For Your Customer. For You. For More Than 50 Years.