CREDIT APPLICATION

IMPORTANT APPLICANT INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. 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.

TYPE OF CREDIT REQUESTED

IMPORTANT: Check (√) the appropriate boxes below and complete the applicable sections.

☐ SECURED ☐ INDIVIDUAL CREDIT - relying solely on my income or assets

☐ UNSECURED ☐ INDIVIDUAL CREDIT - relying on my income or assets as well as income or assets from other sources.

☐ JOINT CREDIT - We intend to apply for joint credit. (initials) _____

FOR CREDITOR USE

DATE _____ CLASS NO. _____

ACCOUNT NO. _____

APPROVED ☐ BY _____

DECLINED ☐ BY _____

AMOUNT REQUESTED	FOR HOW LONG	PAYMENT DATE DESIRED	WANT TO REPAY	PROCEEDS OF LOAN TO BE USED FOR:
$			☐ MONTHLY ☐	

SECTION A - INDIVIDUAL APPLICANT INFORMATION

NAME (Last, First, Middle)

BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS

ADDRESS (Street, City, State & Zip)	COUNTY	Do you ☐ own or ☐ rent?	HOW LONG
PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than 3 years at present address)	COUNTY	Did you ☐ own or ☐ rent?	HOW LONG

EMPLOYER (Company Name & Address)	HOW LONG

BUSINESS PHONE Ext.	POSITION OR TITLE	SALARY PER MONTH GROSS: $ NET: $

PREVIOUS EMPLOYER (Company Name & Address)	HOW LONG

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	TELEPHONE NO. (Include Area Code)

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: ☐ Court Order ☐ Written Agreement ☐ Oral Understanding

SOURCES OF OTHER INCOME	AMOUNT PER MONTH $

Is any income listed in this Section likely to be reduced before the credit request is paid off?	Have you previously received credit from us?
☐ No ☐ Yes (Explain)	☐ No ☐ Yes - When?

SECTION B - JOINT APPLICANT OR OTHER PARTY INFORMATION

Complete only if: for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property state.

NAME (Last, First, Middle)

BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS

RELATIONSHIP TO APPLICANT (If Any)	PRESENT ADDRESS (Street, City, State & Zip)	HOW LONG

EMPLOYER (Company Name & Address)	HOW LONG

BUSINESS PHONE Ext.	POSITION OR TITLE	SALARY PER MONTH GROSS: $ NET: $

PREVIOUS EMPLOYER (Company Name & Address)	HOW LONG

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: ☐ Court Order ☐ Written Agreement ☐ Oral Understanding

SOURCES OF OTHER INCOME	AMOUNT PER MONTH $

Is any income listed in this Section likely to be reduced before the credit requested is paid off?	Has Joint Applicant or Other Party ever received credit from us?
☐ No ☐ Yes (Explain)	☐ No ☐ Yes - When?

SECTION C - MARITAL STATUS

Complete only if: for joint or secured credit, or applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested.

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

ASSETS (attach additional page if needed)

If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Person.
Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

FNB CHECKING ACCOUNT #'S	$
SAVINGS ACCOUNT # and CERTIFICATES OF DEPOSIT	
OTHER ACCOUNTS (401(k), IRA, etc.)	
REAL ESTATE (Address & Description)	
Residence	
Rentals and other real estate	
AUTOMOBILE (Year, make and model)	
OTHER ASSETS: (Mobile Homes, Motorcycles, Boats, Livestock, etc.)	

LIABILITIES (attach additional page if needed)

Real Estate, Vehicles, Credit Cards, etc.

Creditor's Name	Orig. Loan Amount	Payment Amount	Unpaid Balance
	$	$	$

RE-CAP OF MONTHLY INCOME / RE-CAP OF MONTHLY EXPENSES

*Alimony, child support, and maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Salary or Wages		House Payment or Rent	
Rentals		Lot Rent	
Alimony, Child Support*		Alimony, Child Support	
Other Income		Other Payments	

Insurance Company _____ Agent's Name _____ Phone: _____

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. **FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:**

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

SIGNATURES - I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature _____ Date _____

Cell # _____

Mailing Address: _____

Co-applicant's Signature _____ Date _____

Cell # _____

Mailing Address: _____

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