

FIRST NATIONAL BANK OF GILLETTE CONSUMER LOAN APPLICATION

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| Credit Requested Is: <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Collateral Secured Loan <input type="checkbox"/> Personal Unsecured Loan | Account Requested: <input type="checkbox"/> Individual <input type="checkbox"/> Joint |
| Amount Requested \$ | Description of Collateral Offered |
| We intend to apply for joint credit Initial | |
| Purpose of Credit Request | Applicant _____ Co-Applicant _____ |

If the Applicant is married, he or she may apply for individual credit. For Marital Status, check one if a) you are applying for a secured credit; b) you reside in a community property state; or c) you are relying on property in a community property state as a basis for repayment of the credit requested.

| Applicant | Co-Applicant |
|--|---|
| APPLICANT INFORMATION | |
| Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor | Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor |
| Applicant Name (include Jr. or Sr. if applicable) | Co-Applicant Name (include Jr. or Sr. if applicable) |
| Social Security Number | Social Security Number |
| Home Phone (incl. area code) | Home Phone (incl. area code) |
| DOB (mm-dd-yyyy) | DOB (mm-dd-yyyy) |
| Email Address | |
| <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed) | |
| Dependents (not listed by Co-Applicant) | |
| <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien | |
| Present Address (street, city, state, ZIP) since | |
| Mailing Address, if different from Present Address | |
| If residing at present address for less than two years, complete the following: | |
| Former Address (street, city, state, ZIP) from | Former Address (street, city, state, ZIP) from |
| to | to |

| Applicant | Co-Applicant |
|---|---|
| EMPLOYMENT / INCOME INFORMATION | |
| Name & Address of Employer <input type="checkbox"/> Self Employed | Name & Address of Employer <input type="checkbox"/> Self Employed |
| Yrs. on this job | Yrs. on this job |
| <input type="checkbox"/> Full time | <input type="checkbox"/> Full time |
| Position/Title & Type of Business | Position/Title & Type of Business |
| Business Phone (incl. area code) | Business Phone (incl. area code) |
| Gross Monthly Income \$ | Gross Monthly Income \$ |
| Name & Address of Employer <input type="checkbox"/> Self Employed | Name & Address of Employer <input type="checkbox"/> Self Employed |
| Dates from | Dates from |
| to | to |
| Position/Title & Type of Business | Position/Title & Type of Business |
| Business Phone (incl. area code) | Business Phone (incl. area code) |
| Name & Address of Employer <input type="checkbox"/> Self Employed | Name & Address of Employer <input type="checkbox"/> Self Employed |
| Dates from | Dates from |
| to | to |
| Position/Title & Type of Business | Position/Title & Type of Business |
| Business Phone (incl. area code) | Business Phone (incl. area code) |

NOTICE: 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.

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|--------------|--|----|--------------|--|----|
| Other Income | | \$ | Other Income | | \$ |
| Other Income | | \$ | Other Income | | \$ |
| Other Income | | \$ | Other Income | | \$ |

| HOUSING INFORMATION | | | |
|--|-------------------------|------------------|----------------|
| <input type="checkbox"/> Own <input type="checkbox"/> Rent since | Monthly Housing/Rent \$ | Present Value \$ | Date Purchased |

| CASH ASSET INFORMATION | | |
|----------------------------|---------------------------|-----------------------------|
| Financial Institution Name | Saving Account Balance \$ | Checking Account Balance \$ |

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

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| X | X | |
| Applicant | Date | Date |
| | Co-Applicant | |

ASSETS AND LIABILITIES ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant: _____

Application Number: _____

| Assets | Liabilities |
|--------|-------------|
|--------|-------------|

Checking and Savings Accounts

Name and Address of Creditor

| Name & Address of Institution | Cash or Market Value |
|-------------------------------|----------------------|
| | |

| Name & Address of Company | Payment | Balance |
|---------------------------|---------|---------|
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| Acct. No. | \$ |
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| Acct. No. | \$ | \$ |
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| Name & Address of Institution | Cash or Market Value |
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| Name & Address of Company | Payment | Balance |
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| Name & Address of Institution | Cash or Market Value |
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| Name & Address of Company | Payment | Balance |
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| Acct. No. | \$ | \$ |
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| Name & Address of Institution | Cash or Market Value |
|-------------------------------|----------------------|
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| Name & Address of Company | Payment | Balance |
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| Name & Address of Institution | Cash or Market Value |
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| Name & Address of Company | Payment | Balance |
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Stocks and Bonds Assets

| Name & Address of Company | Payment | Balance |
|---------------------------|---------|---------|
|---------------------------|---------|---------|

| Number | Description | Cash or Market Value |
|--------|-------------|----------------------|
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| Acct. No. | \$ | \$ |
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| Name & Address of Company | Payment | Balance |
|---------------------------|---------|---------|
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Automobiles Owned:

| Name & Address of Company | Payment | Balance |
|---------------------------|---------|---------|
|---------------------------|---------|---------|

| Year | Make and Model | Cash or Market Value |
|------|----------------|----------------------|
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| Name & Address of Company | Payment | Balance |
|---------------------------|---------|---------|
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Other Assets Owned:

| Name & Address of Company | Payment | Balance |
|---------------------------|---------|---------|
|---------------------------|---------|---------|

| Description | Cash or Market Value |
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| Acct. No. | \$ | \$ |
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| Name & Address of Company | Payment | Balance |
|--|---------|---------|
| Alimony/Child Support/Separate Maintenance Owed to | \$ | |

| Name & Address of Company | Payment | Balance |
|---------------------------|---------|---------|
| Job Related Expense | \$ | |

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|----------------------|----|
| LIQUID ASSETS | \$ |
|----------------------|----|

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| TOTAL MONTHLY PAYMENTS | \$ | |
|-------------------------------|----|--|

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|---------------------|----|
| TOTAL ASSETS | \$ |
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| TOTAL LIABILITIES | \$ | |
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| NET WORTH | \$ |
|------------------|----|

*** indicates obligations satisfied at or before loan closing.

INTERVIEWER INFORMATION ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant:

Application Number:

INTERVIEWER INFORMATION

| | | | |
|--|--|-------------------------------------|------|
| Originator Name | | Phone Number | Ext. |
| Originator NMLSR Identifier | | Originator License State and Number | |
| Company Name | | | |
| Company NMLSR Identifier | | Company License State and Number | |
| Company Address (street, city, state, ZIP) | | | |