



CHECK BOX FOR JOINT ACCOUNT: If you are applying for a joint account or an account that you and another person will use, please complete all sections, providing information in Part III, below, about the Joint Applicant or user.

We intend to apply for Joint Credit.

Applicant _____ Co-Applicant _____

PART I

CREDIT APPLICATION

IMPORTANT: Lender Must Complete Part I.

Check Applicable Box: Secured Installment Loan Individual Application
 Unsecured Installment Loan Joint Application

Date	Amount Requested	Term	Desired Payment Date	Purpose of Loan
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Description of Collateral Securing Loan (If Applicable)

APPLICANT INSTRUCTIONS: Part II Must be Completely Filled in Except for Shaded Areas Which are Optional.

PART II

Title: <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.		Name	No. of Dep.	Date of Birth
Address		City/State/Zip	No. Years	Social Security Number
Former Address		Former City/State/Zip	No. Years	Phone Number
Are you a U.S Citizens? If No, describe immigration status <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you an Active Service Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	DO NOT COMPLETE the marital status if this application is for individual unsecured credit. <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed)	
Employer	Position	No. Years	Wages	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly
Employer Address		City/State/ Zip	Employer Phone Number	
Former Employer (If Less Than 3 Years)				
Income (Optional)	Alimony or child support or separate maintenance payments are optional information and need not be revealed if the applicant does not choose to rely on such income in applying for credit. \$ _____		Verification Required <input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually	
Additional Income				
Investment Income: \$ _____		<input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually	Source	
Financial				
Checking-Bank		Branch	Savings-Bank Branch	
DEBTS- List all banks, stores, loan & finance companies, credit unions and others whom you are indebted. Include any revolving line of credit. Use extra sheet if necessary				
Creditor		Monthly Payment	Present Balance	Creditor
Landlord or Mortgage Holder				
1				4
Auto-Lienholder				
2				5
3				6
Other Obligations		No. of Dependents and Ages	Total Monthly Liability to Pay Alimony, Child Support or Separate Maintenance \$ _____	
Credit References				
1				3
2				4
Are you a Co-Maker, Endorser or Guarantor on any loan or contract?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If "yes" for whom?	To Whom?
Are there any unsatisfied judgements against you?		<input type="checkbox"/> Yes <input type="checkbox"/> No *OMIT if more than 7 years	Amount \$	If "yes" to whom owed?
Were you ever Bankrupt?		<input type="checkbox"/> Yes <input type="checkbox"/> No *OMIT if more than 10 years	If "yes" where?	Year

CO-APPLICANT INSTRUCTIONS: Part III Must be Completely Filled in Except for Shaded Areas Which are Optional.

PART III

Title: <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.		Name	No. of Dep.	Date of Birth
Address		City/State/Zip	No. Years	Social Security Number
Former Address		Former City/State/Zip	No. Years	Phone Number
Are you a U.S Citizens? If No, describe immigration status <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you an Active Service Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single, Divorced, Widowed)	
Employer	Position	No. Years	Wages	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly
Employer Address		City/State/ Zip	Employer Phone Number	
Former Employer (If Less Than 3 Years)				
Income (Optional)	Alimony or child support or separate maintenance payments are optional information and need not be revealed if the applicant does not choose to rely on such income in applying for credit. \$ _____		Verification Required <input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually	

Additional Income					
Investment Income: [] Monthly [] Semi-Annually		Source			
\$ _____ [] Quarterly [] Annually					
FINANCIAL					
Checking-Bank _____ Branch			Savings-Bank _____ Branch		
DEBTS- List all banks, stores, loan & finance companies, credit unions and others whom you are indebted. Include any revolving line of credit. Use extra sheet if necessary					
Creditor		Monthly Payment	Present Balance	Creditor	
Landlord or Mortgage Holder					
1				4	
Auto-Lienholder					
2				5	
3				6	
Other Obligations		No. of Dependents and Ages	Total Monthly Liability to Pay Alimony, Child Support or Separate Maintenance \$		
Credit References					
1			3		
2			4		
Are you a Co-Maker, Endorser or Guarantor on any loan or contract?		[] Yes [] No	If "yes" for whom?		To Whom?
Are there any unsatisfied judgements against you?		[] Yes [] No	*OMIT if more than 7 years	Amount \$	If "yes" to whom owed?
Were you ever Bankrupt?		[] Yes [] No	*OMIT if more than 10 years	If "yes" where?	Year

PART III (continued)

CREDIT INQUIRES

I/We Authorize the lender to make whatever credit inquires it deems necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on the application. I/We authorize and instruct any person or consumer reporting agency to compile and furnish to the Lender any information it may have obtain in response to such credit inquiries and agree that same shall remain your property whether or not credit is extended.

I am/We are hereby notified that a consumer report may be requested in connection with this credit application. If I/we request, I/we will be informed whether or not a consumer report was requested, and if such report was requested, I/we will be informed of the name and address of the consumer reporting agency that furnished the report. Subsequent consumer reports may be requested or utilized in connection with an update, renewal, or extension of the credit.

All information set forth in this application is declared to be true representation of facts for the purpose of obtaining the credit requested and any willful misrepresentation on this application could result in criminal action.

NOTICE OF GUARANTOR: If you are providing information to the Lender on this application for the purpose of acting as guarantor for one of more primary applicant(s) and the Lender determines that you, as guarantor, do not meet the credit underwriting standards for this particular loan and/or amount, be advised that the Lender is required by law to, and will, provide an adverse action notice detailing the specific reasons for the credit denial *directly* to the primary applicant(s) and not to you.

As a guarantor, be prepared to share specific reasons for adverse action based on your credit history with the primary applicant(s). If you are unwilling to share this information, you should not complete this application in the capacity of guarantor.

By completing and submitting this application as guarantor, you are authorizing the Lender to share the specific reasons for adverse action with the primary applicant(s) in the event this application is denied.

USA PATRIOT ACT- PROCEDURES FOR OPENING A NEW ACCOUNT:

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 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 ask to see your driver's license or other identifying documents.

IMPORTANT: THIS APPLICATION MUST BE SIGNED AND DATED BELOW, BEFORE IT CAN BE PROCESSED.

SIGNATURE OF APPLICANT	DATE	SIGNATURE OF CO-APPLICANT	DATE
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COMPLETED BY LENDER:

Identification	Issue Date	Expire Date	Identification	Issue Date	Expire Date
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Interviewer's Signature: _____ **Name and/or Title:** _____