Credit Application

			funding of terrorism an requires all financial ins that identifies each per What this means for y account, we will ask for information that will all your driver's license or we may use outside so you provide is protecte	son who applies for a loa ou. When you apply for a or your name, address, d ow us to identify you. W other identifying docum urces to confirm the info d by our privacy policy a carefully before completing	vities, federal law , and record information an or opens an account. Ioan or open an ate of birth and other /e may also ask to see ents. In some instances, rmation. The information nd federal law.	
	Creditor			For Creditor Use		
(<i>"You"</i> means	Applicant, et al; and "We	" means Creditor)	Account No.	Class No.	Date Received	
		1 Type of	Application			
Check only one of the	three types:	1. Type of				
	ou are relying <u>solely</u> on y	our income or assets.	Joint Credit - By initi	aling below, you intend t	o apply for "joint credit".	
	You are relying on your in is income or assets from		Applicant Joint Applicant			
		2. Type of Red				
Application Date	Amount	Financing Type	No. of Months	Repayment Interval	First Payment Date	
	\$	 New Refinance Modification 		Monthly		
Credit Type	Loan Purpose	Security for Credit	Proceeds of Credit to B	e Used for		
 □ Line of Credit □ Loan □ Sale □ Lease 	 Agricultural Business Consumer 	☐ Unsecured ☐ Secured	 To purchase property that will secure your credit To purchase property that is a residential dwelling and is not real estate To finance home improvements to a residential dwelling Other (describe): 			
Applicant		3. Applicant	Information	Joint Applic	ant or Other Party	
Full Name (First, Middle	e, Last)		Full Name (First, Middle, Last)			
Gov't ID Type	Gov't ID No.	Gov't ID Issued By	Gov't ID Type	Gov't ID No.	Gov't ID Issued By	
dov tib Type		GOV TID ISSUED By	dov tib Type		GOV TID ISSUED By	
Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth	Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth	
Soc. Sec. No.	Primary Phone Cell	Second Phone Cell	Soc. Sec. No.	Primary Phone Cell	Second Phone Cell	
Email Address:			Email Address:			
Present Address 🛛	Own 🗆 Rent 🗌	No. of Yrs.:	Present Address 🛛 🛛	Own 🗌 Rent 🗌	No. of Yrs.:	
Previous Address 🛛	Own 🗆 Rent 🗆	No. of Yrs.:	Previous Address 🗌 🛛	Own 🗌 Rent 🗌	No. of Yrs.:	
Dependents No.:	Ages:		Dependents No.: Ages:			
Nearest Relative (not living with you)			Nearest Relative (not living with you)			
Name:			Name:			
Address:			Address:			
Telephone: Cell			Telephone:			
Your Relationship to us (or our affiliate)			Your Relationship to us	(or our affiliate)		
□ None □ Employee □ Insider (Shareholder, Director, Officer)			□ None □ Employee □ Insider (Shareholder, Director, Officer)			
Have you ever received credit from us?			Have you ever received credit from us? Yes No			
If yes, when: office/branch:			If yes, when: office/branch:			

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If the "Joint Applicant" of	or "Other Party" Sections	4. Asset and D s were completed, this Section	ebt Information on should be comple	eted by giving inform	nation about both the Applic	ant, and	
the Joint Applicant or Oth Assets Owned	ner Party, if applicable.						
Type of Asset or Description	Account Number	Current Market Value	Remaining Balance of Lien (Enter "0" if none)		Asset Owner's Name		
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
Amounts from Continuation Form		\$	\$				
Total Assets		\$	\$				
		charge accounts, installment					
Creditor Name	Type of Debt, or Account Number	Original Amount	Present Balance	Monthly Payment	Debtor's Name	Past Due (Yes/No)	
Landlord	Rent Payment			\$			
	Mortgage	\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
Amounts from		\$	\$	\$			
Continuation Form							
Continuation Form Total Debts		\$	\$	\$			
Continuation Form	ne	\$	\$ Original Amount	-	Date Paid in Full		
Continuation Form Total Debts	ne	\$		-	Date Paid in Full		
Continuation Form Total Debts	ne	\$	Original Amount	-	Date Paid in Full		

Applicant	5. Employmer	nt Information	Joint Applicant or Other Party		
	Self No. of Yrs.:	1st Employer: □ Current Name: Address:	□ Previous □ Self No. of Yrs.:		
Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:		Mgr.: Gross Monthly Salary/Comr Position/Title:	Phone: n.: \$		
2nd Employer: Current Previous Name: Address:	Self No. of Yrs.:	2nd Employer: Current Name: Address:	☐ Previous ☐ Self No. of Yrs.:		
Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:		Mgr.: Gross Monthly Salary/Comr Position/Title:	Phone: n.: \$		
3rd Employer: Current Previous Name: Address:	Self No. of Yrs.:	3rd Employer : □ Current Name: Address:	☐ Previous ☐ Self No. of Yrs.:		
Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:	6.044	Mgr.: Gross Monthly Salary/Comr Position/Title:	-		
Applicant		r Income	Joint Applicant or Other Party		
Alimony, child support, or separate maintena revealed if you do not wish to have it consid this obligation.		Alimony, child support, or separate maintenance income <u>need not</u> be revealed if you do not wish to have it considered as a basis for repaying this obligation.			
Alimony, child support, separate maintenance	e received under: Oral understanding	Alimony, child support, separate maintenance received under:			
Other Income:		Other Income:			
\$ per Month Source:		\$ per Month Source:			
Is any income listed in Sections 4, 5 or 6 like credit is paid off: Yes (<i>Explain in section 10.</i>) No	ly to be reduced before the	Is any income listed in Sect credit is paid off:	tions 4, 5 or 6 likely to be reduced before the 0./ □ No		
Applicant	7 Other (Joint Applicant or Other Party		
☐ Yes ☐ No If yes, Amount: \$ For whom: To whom:	7. Other Obligations Are you a co-maker, endorser, co-signer, surety, or guarantor on any loan, contract or other obligation?		☐ Yes ☐ No If yes, Amount: \$ For whom: To whom:		
□ Yes □ No If yes,	Are there any unsatisfied judgments against you?		☐ Yes ☐ No If yes,		
Amount per month: \$ To whom:			Amount per month: \$ To whom:		
☐ Yes ☐ No If yes, Where: Year:	Have you been declared bankrupt in the last 10 years?		☐ Yes ☐ No If yes, Where: Year:		
☐ Yes ☐ No If yes, Amount per month: \$ To whom:	Are you obligated to make Alimony, Support or Maintenance Payments?		☐ Yes ☐ No If yes, Amount per month: \$ To whom:		
	8. Property Inforn	nation (if secured)			
Property Type Property Description Boat or Vessel Certificate of Deposit Deposit Account Manufactured Home Motor Vehicle Property Description			Property Location and Address		
Residential Dw	•	roperty			
Primary Use of Property Property Owner(s) Agricultural Business Consumer Value	Names & Addresses				

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Applicant		9. Marita	al Status	Joint Applic	ant or Other Party	
Leave blank, unless: (1) the credit will be sec (2) you reside in a comm (3) you are relying on pr state, as a basis for	nunity property state, or operty, located in a com		Leave blank, unless: (1) the credit will be secure: (2) you reside in a communi (3) you are relying on prope state, as a basis for reparent	ity property state, o rty, located in a co		
□ Separated	v state law; incl. domestic single, divorced, widowea		 Married (as defined by state Separated Unmarried (including sing 		tic partnership, civil union)	
) 10. Additional Inform		ie, alvorcea, widowi	90)	
			·			
California Residents. Ead	h applicant if married		otices			
New York Residents. A contract not a report was ordered	onsumer report may be If a report was ordered	ordered in connection w , we will tell you the nar	ith your application. Upon you ne and address of the consum an update, renewal or extensio	er reporting agency	/ that provided the	
credit reporting agencies compliance with this law	maintain separate credit tent to defraud or knowi	t histories on each individing that he is facilitating	make credit equally available dual upon request. The Ohio C a fraud against an insurer, sub	ivil Rights Commiss	ion administers	
	ner of the homestead is	not required to apply the	e proceeds of the extension of	credit to repay an	other debt except debt	
§ 766.59 or a court decr credit is granted, is furnis to the Creditor is incurred	ee under Wisc. Statutes shed a copy of the agree I. esidents. The credit bein	§ 766.70 adversely affe ment, statement or decr g applied for, if granted,	narital property agreement, un ects the interests of the Credit ee or has actual knowledge of will be incurred in the interest ny spouse.	or unless the Credit the adverse provis	or, prior to the time the ion when the obligation	
	12.	Certifications, Autho	rizations and Signatures			
You certify that everything you have stated in this Credit Application and on any other documents submitted to us are true and correct to the best of your knowledge. You understand that you must update the information contained in this Credit Application if either your financial condition materially changes or we make a request to you orally or in writing. You understand that we will retain this Credit Application whether or not it is approved.						
others may ask us about	our credit experience w	ith you.	verify your credit and employr	•		
connection with your cre specialized mobile radio	dit account - regardless service, other radio com	whether the number we non carrier service or an	d on this Credit Application or use is assigned to a paging se y other service for which you through the use of prerecorded	rvice, cellular telep may be charged fo	hone service, r the call. You further	
□ Electronic Signature. If checked, You further agree that you have signed this <i>Credit Application</i> with one or more electronic signatures. You intend your electronic signature to have the effect of your written ink signature. You viewed and read the entire <i>Credit Application</i> and notices before you signed it. You received a paper copy of this <i>Credit Application</i> after it was signed. You understand that this <i>Credit Application</i> is in the electronic form that we will keep. We may rely on, and enforce, this <i>Credit Application</i> in the electronic form or as a paper version of the electronic form.						
Applicant Signature		Date	Joint Applicant, or Other	Party, Signature	Date	
			(if applicab	le)		
Notice: It is a federal crin as applicable under the p	ne punishable by fine, in rovisions of Title 18, Ur	nprisonment, or both, to ited States Code § 1001	knowingly make any false stat		any of the above facts	
		Mortgage Loan Orig				
If this <i>Credit Application</i> is secured by a consumer's residential dwelling that is owned by you, we may be required under federal or state law to disclose our mortgage loan origination identification number(s), which are as follows, if applicable: Mortgage Loan Originator Name and Identifier: Mortgage Loan Origination Company Name and Identifier: 						
Date Received	Received By	For Crea Date Action Taken	Action Taken By	Action Taken	Reason Code(s)	
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