

REAL ESTATE LOAN APPLICATION

LENDER NOTICE

This application form should not be used if the proceeds of this request will be used to purchase or refinance a dwelling to be occupied by the applicant as a principal residence. Please read the directions below before completing this application, and check the appropriate box below.

LENDER NAME AND ADDRESS

If you are applying for individual credit in your own name, and are relying on your own income or assets of another person as the basis for repayment of the credit requested, complete only Sections A, B, D, E, F.

If you are applying for joint credit with another person, complete all Sections.

If you are applying for individual credit, but are relying on income alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections to the extent possible, providing information in C about the person on whose alimony, support, or maintenance payments or income or assets you are relying.

AMOUNT \$	NO. OF MONTHS	PROCEEDS TO BE USED FOR	TYPE OF PROPERTY
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SECTION A - PROPERTY INFORMATION AND PURPOSE OF LOAN

SUBJECT PROPERTY ADDRESS (street, city, state & zip)	NO. OF UNITS
LEGAL DESCRIPTION OF PROPERTY (Attach description if necessary)	YEAR BUILT

GENERAL DESCRIPTION OF SUBJECT PROPERTY (Type of Property, square footage, acreage, etc.)

PURPOSE OF LOAN:	PROPERTY IS HELD FOR:
	<input type="checkbox"/> INVESTMENT <input type="checkbox"/> BUSINESS <input type="checkbox"/> AGRICULTURE <input type="checkbox"/> OTHER

Complete this line if construction loan.

YEAR LOT ACQUIRED	ORIGINAL COST \$	AMOUNT EXISTING LIENS \$	(a) PRESENT VALUE OF LOT \$	(b) COST OF IMPROVEMENTS \$
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Complete this line if this is a refinance loan.

YEAR ACQUIRED	ORIGINAL COST \$	AMOUNT EXISTING LIENS \$	PURPOSE OF REFINANCE \$	DESCRIBE IMPROVEMENTS	<input type="checkbox"/> MADE <input type="checkbox"/> TO BE MADE
				Cost: \$	

TITLE WILL BE HELD IN WHAT NAMES(S)	MANNER IN WHICH TITLE WILL BE HELD
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SOURCE OF DOWN PAYMENT, SETTLEMENT CHARGES AND/OR SUBORDINATE FINANCING (explain)	ESTATE WILL BE HELD IN:
	<input type="checkbox"/> FEE SIMPLE <input type="checkbox"/> LEASEHOLD (show expiration date)

SECTION B - INFORMATION REGARDING APPLICANT (Use separate sheet if necessary.)

FULL NAME (Last, First, Middle)	HOME PHONE	BIRTH DATE	DL NUMBER	SOCIAL SECURITY NUMBER
PRESENT STREET ADDRESS	CITY/STATE	ZIP	How long at this address?	
PREVIOUS STREET ADDRESS	CITY/STATE	ZIP	How long at this previous address?	

PRESENT EMPLOYER NAME AND ADDRESS	POSITION/TITLE	YEARS EMPLOYED	NAME OF SUPERVISOR	BUSINESS PHONE	EXT
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PREVIOUS EMPLOYER-NAME AND ADDRESS	PRESENT NET SALARY/COMMISSION \$ PER	NO. OF DEPENDANTS	LIST DEPENDANTS BY AGE
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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 OR SEPARATE MAINTENANCE UNDER:
 Court Order
 Written Agreement
 Oral Understanding

OTHER INCOME \$ PER	SOURCE(S) OF OTHER INCOME
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IS ANY INCOME IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUESTED IS PAID OFF?

NO YES (explain)

HAVE YOU EVER HAD A LOAN FROM US? <input type="checkbox"/> NO <input type="checkbox"/> YES - WHEN?	Checking Account No.	Institution Name:	
	Savings Account No.	Institution Name:	
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU	ADDRESS	RELATIONSHIP	TELEPHONE NO. (include area code)

SECTION C - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheet if necessary.)

FULL NAME (Last, First, Middle)	RELATIONSHIP TO APPLICANT (if any)	BIRTH DATE	DL NUMBER	SOCIAL SECURITY NUMBER
PRESENT STREET ADDRESS	CITY/STATE	ZIP	How long at this address?	
PRESENT EMPLOYER NAME AND ADDRESS				

POSITION/TITLE	YEARS EMPLOYED	NAME OF SUPERVISOR	BUSINESS PHONE	EXT
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PREVIOUS EMPLOYER-NAME AND ADDRESS	PRESENT NET SALARY/COMMISSION \$ PER	NO. OF DEPENDANTS	LIST DEPENDANTS BY AGE
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SECTION C - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheet if necessary.)

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 OR SEPARATE MAINTENANCE UNDER: Court Order Written Agreement Oral Understanding

OTHER INCOME SOURCE(S) OF OTHER INCOME

\$ _____ PER _____
 IS ANY INCOME IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUESTED IS PAID OFF?

NO YES (explain)

HAVE YOU EVER HAD A LOAN FROM US?

NO YES - WHEN?

Checking Account No. _____ Institution Name: _____

Savings Account No. _____ Institution Name: _____

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU

ADDRESS _____

RELATIONSHIP _____

TELEPHONE NO (include area code) _____

SECTION D - MARITAL STATUS

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

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

SECTION E - ASSET AND DEBT INFORMATION

If Section C has been completed, this section should be completed, giving information about both the applicant and co-applicant or another person. Please mark co-applicant related information with a "C". If Section C was not completed, only give information about the applicant in this section.

ASSETS OWNED (Use separate sheet if necessary.)

DESCRIPTION OF ASSETS	ESTIMATED VALUE	SUBJECT TO LIEN? YES/NO	NAME(S) OF OWNER(S)
CASH ON HAND AND ON DEPOSIT IN BANKS	\$ _____		
DEPOSITS WITH SAVINGS AND LOANS AND CREDIT UNIONS	\$ _____		
AUTOMOBILES (make, model, year)	\$ _____		
	\$ _____		
CASH VALUE OF LIFE INSURANCE (issuer, face value)	\$ _____		
REAL ESTATE (location, date acquired)	\$ _____		
MARKETABLE SECURITIES (issuer, type, number of shares)	\$ _____		
	\$ _____		
OTHER ASSETS	\$ _____		
	\$ _____		
	\$ _____		
TOTAL ASSETS	\$ _____		

AUTO INSURANCE AGENT'S NAME AND ADDRESS _____

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary.)

CREDITOR	TYPE OF DEBT OR ACCOUNT NUMBER	NAME IN WHICH ACCOUNT IS CARRIED	ORIGINAL DEBT (omit rent)	PRESENT BALANCE (omit rent)	MONTHLY PAYMENTS	PAST DUE? YES/NO
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$ _____	\$ _____	\$ _____	
			\$ _____	\$ _____	\$ _____	
			\$ _____	\$ _____	\$ _____	
			\$ _____	\$ _____	\$ _____	
			\$ _____	\$ _____	\$ _____	
VISA	<input type="checkbox"/>		\$ _____	\$ _____	\$ _____	
MASTERCARD	<input type="checkbox"/>		\$ _____	\$ _____	\$ _____	
TOTAL DEBTS			\$ _____	\$ _____	\$ _____	

CREDIT REFERENCES (paid accounts)

CREDITOR	TYPE OF DEBT OR ACCOUNT NUMBER	NAME IN WHICH ACCOUNT IS CARRIED	ORIGINAL DEBT	DATE PAID
			\$ _____	\$ _____
			\$ _____	\$ _____

ARE YOU A CO-MAKER, ENDORSER, OR GUARANTOR ON ANY LOANS OR CONTRACTS?

NO YES-FOR WHOM?

TO WHOM? _____

ARE THERE ANY UNSATISFIED JUDGEMENTS AGAINST YOU?

NO YES-AMOUNT?

IF YES, TO WHOM OWED? _____

HAVE YOU BEEN DECLARED BANKRUPT IN THE LAST 10 YEARS?

NO YES-FOR WHERE?

YEAR? _____

OTHER OBLIGATIONS (example: liability to pay alimony, child support, separate maintenance, etc. Use separate sheet if necessary.) _____

SECTION F - DETAILS OF TRANSACTION

TOTAL COSTS		FINANCING DETAIL	
a. Purchase price	\$ _____	h. Loan Request	\$ _____
b. Alterations, improvements, repairs	\$ _____	i. Subordinate Financing	\$ _____
c. Land (if acquired separately)	\$ _____	j. Borrower's closing costs paid by Seller	\$ _____
d. Refinance (include debts to be paid off)	\$ _____	k. Other Credits (explain)	
e. Estimated prepaid items	\$ _____		\$ _____
f. Estimated closing costs	\$ _____	l. Subtract Total Costs	\$ _____
g. Total costs (add items a through f)	\$ _____	m. Cash from/to Borrower	\$ _____

You have a right to a copy of the appraisal report used in connection with your application for credit. If you wish a copy, please write to us at the mailing address we have provided. We must hear from you no later than 90 days after we notify you about the action taken on your credit application or you withdraw your application.

Everything I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.

APPLICANT'S SIGNATURE _____

DATE _____

OTHER SIGNATURE (where applicable) _____

DATE _____