

HOME IMPROVEMENT

2ND MORTGAGE

Loan Number _____

Life Ins. _____

PERSONAL

VEHICLE

Premium _____

Security _____

Date	Total Loan Amount	Term	Purpose of Loan			APPLICATION FOR <input type="checkbox"/> INDIVIDUAL CREDIT		<input type="checkbox"/> JOINT CREDIT				
APPLICANT 1 Optional Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/>					APPLICANT 2 Optional Title: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/>							
LAST NAME (Please Print)	FIRST NAME	MI	SOCIAL SECURITY NO.	AGE	NO. OF DEPENDANTS OTHER THAN APPLICANTS	LAST NAME (Please Print)	FIRST NAME	MI	SOCIAL SECURITY NO.	AGE	NO. OF DEPENDANTS OTHER THAN APPLICANTS	
STREET ADDRESS		CITY	STATE	HOW LONG	TELEPHONE NO.	STREET ADDRESS		CITY	STATE	ZIP	HOW LONG	TELEPHONE NO.
<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> ROOM	NAME AND ADDRESS OF LANDLORD MORTGAGE HOLDER		MONTHLY PMT.	MORTGAGE BAL.		<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> ROOM	NAME AND ADDRESS OF LANDLORD MORTGAGE HOLDER		MONTHLY PMT.	MORTGAGE BAL.		

NOTICE TO ALL APPLICANTS: Alimony, Child Support, or Separate Maintenance income need not be revealed if Borrower or Co-Borrower does not choose to have it considered as a basis for repayment of this loan.

PRESENTLY EMPLOYED BY			YEARS	OCCUPATION	MOTHLY SALARY	PRESENTLY EMPLOYED BY			YEARS	OCCUPATION	MOTHLY SALARY		
BUSINESS ADDRESS					BUS. TELEPHONE NO.		BUSINESS ADDRESS					BUS. TELEPHONE NO.	
PREVIOUS ADDRESS			YEARS	PREVIOUS EMPLOYER		YEARS	PREVIOUS ADDRESS			YEARS	PREVIOUS EMPLOYER		YEARS
OTHER INCOME SOURCE		ANNUAL AMT.	OTHER INCOME SOURCE			ANNUAL PMT.	OTHER INCOME SOURCE		ANNUAL AMT.	OTHER INCOME SOURCE			ANNUAL AMT.
AUTO MAKE	YEAR	MODEL	FINANCED BY (Name and Address)			BALANCE DUE	AUTO MAKE	YEAR	MODEL	FINANCED BY (Name and Address)			BALANCE DUE
BANKING WITH CHECKING	BANK(S)		ACCOUNT NO.			BANKING WITH CHECKING	BANK(S)		ACCOUNT NO.				
SAVINGS	BANK(S)		ACCOUNT NO.			SAVINGS	BANK(S)		ACCOUNT NO.				
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU					RELATIONSHIP	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU					RELATIONSHIP		

Applicant 1 Credit References						
Firm Name	Type	D.O.	H.C.	MO. PMTS.	BALANCE	HOW PAID
1						
2						
3						
4						
5						
6						

Authorization Statement

I authorize you to obtain such information as you may require concerning the statements made in this application, and agree that the application shall remain your property whether or not the loan is granted. I agree to notify the bank of any material change in the above statement I hand to you herewith my/our Promissory Note.

I certify that each of the answers to the foregoing questions is true and complete and made for the purpose of obtaining credit.

Signature of Borrower(s) X _____

X _____

Approved Rejected By: _____

Applicant 2 Credit References						
Firm Name	Type	D.O.	H.C.	MO. PMTS.	BALANCE	HOW PAID
1						
2						
3						

Amt..... Term:

Borrower Rec..... Mo. Pmts..... @

Interest..... Remarks: