



# MAPLE BANK CONSUMER LOAN APPLICATION

CREDIT REQUESTED					
Account Requested <b>Individual    Joint</b>	Amt. Requested	# of Payments	Preferred Pmt. Amt.	Preferred Pmt. Day	Market Survey
We intend to apply for joint credit.		Specific Purpose of Loan			
_____ Applicant    _____ Co-Applicant	Collateral Offered				

### COMPLETION INSTRUCTIONS FOR APPLICANT

Complete the Applicant Information section for the first Applicant. Mark the appropriate box to indicate whether the Applicant is applying as a Borrower, Cosigner, Guarantor, Grantor (of collateral), or Other for a different capacity. If the Applicant is married, he or she may apply for individual credit.

APPLICANT INFORMATION:		Borrower	Cosigner	Guarantor	Grantor	Other: _____
Applicant's Full Name (First M.I. Last)		Social Security Number		First Names and Aliases		
Home Phone	Date of Birth	Driver's License Number	Ages of Dependents	Years of Education	Years of Current Profession	

### ADDRESS INFORMATION

Home Address (Street, City, State, Zip Code) (If rural, show Road and Box No)			Since	Own Rent	
Mailing Address (Street or P.O. Box, City, State, Zip Code)					
Previous Home Address (Street, City, State, Zip Code)				From	To

### EMPLOYMENT INFORMATION

Applicant's Employer (if Self-Employed, Name and Nature of Business)			Business Address (Street, City, State, Zip Code)		
Type of Business	Supervisor	Phone Number	Title / Position	Since	Salary per
Second Employer (if Self-Employed, Name and Nature of Business)			Business Address (Street, City, State, Zip Code)		
Type of Business	Supervisor	Phone Number	Title / Position	Since	Salary per

### COMPLETION INSTRUCTIONS FOR CO-APPLICANTS

(a) If you are applying for joint credit or will be permitted to use the account, complete the Co-Applicant Information section as a Borrower. (b) If the Applicant is applying for individual credit, but relying on income from alimony, child support, or separate maintenance or on the income of assets of another person as the basis for repayment of the credit requested, complete the Co-Applicant Information section, to the extent possible, providing information about the person on whose alimony, support, or maintenance payments or income or assets the Applicant is relying. (c) If the Applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested, complete the Co-Applicant Information section with regard to the Applicant's spouse.

CO-APPLICANT INFORMATION		Borrower	Cosigner	Guarantor	Grantor	Other: _____
Co-Applicant's Full Name (First M.I. Last)		Social Security Number		First Names and Aliases		
Home Phone	Date of Birth	Driver's License Number	Ages of Dependents	Years of Education	Years of Current Profession	

### ADDRESS INFORMATION

Home Address (Street, City, State, Zip Code) (If rural, show Road and Box No)			Since	Own Rent	
Mailing Address (Street or P.O. Box, City, State, Zip Code)					
Previous Home Address (Street, City, State, Zip Code)				From	To

### EMPLOYMENT INFORMATION

Co-Applicant's Employer (if Self-Employed, Name and Nature of Business)			Business Address (Street, City, State, Zip Code)		
Type of Business	Supervisor	Phone Number	Title / Position	Since	Salary per
Second Employer (if Self-Employed, Name and Nature of Business)			Business Address (Street, City, State, Zip Code)		
Type of Business	Supervisor	Phone Number	Title / Position	Since	Salary per

### FINANCIAL STATEMENT

PARTIES: App    CoApp    Joint			ASSETS:	VALUE:	PARTIES: App    CoApp    Joint			DEBTS:	BALANCE:	MO PYMT:
			Cash in Banks:	\$				Mortgage/Rent	\$	\$
			Investments:	\$				2 <sup>nd</sup> Mort/Cr Line	\$	\$
			Retirement Accts:	\$				Alimony/Child Support	\$	\$
			Automobiles:	\$				Auto Loans:	\$	\$
			Homestead:	\$				Credit Cards:	\$	\$
			Real Estate:	\$				Child Care:	\$	\$
			Other Assets:	\$				Other Loans:	\$	\$
			<b>TOTAL ASSETS:</b>	<b>\$</b>				<b>TOTAL DEBTS:</b>	<b>\$</b>	<b>\$</b>

**QUESTIONS**

Applicant (1)		Co-Applicant (2)		Explanation (Please use an attached sheet if necessary.)
Yes	No	Yes	No	Are there any outstanding judgments against you?
Yes	No	Yes	No	Have you ever been declared bankrupt?
Yes	No	Yes	No	Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?
Yes	No	Yes	No	Are you party to a lawsuit?
Yes	No	Yes	No	Are you obligated on any loan resulting in judgment, foreclosure or title transfer?
Yes	No	Yes	No	Are you delinquent/in default on any Federal debt, financial obligation, bond, or loan guarantee?
Yes	No	Yes	No	Are you obligated to pay alimony, child support, or separate maintenance?
Yes	No	Yes	No	Is any part of the down payment borrowed?
Yes	No	Yes	No	Are you a co-maker or an endorser on a loan?
Yes	No	Yes	No	Have you ever had merchandise repossessed?
Yes	No	Yes	No	Have you ever been denied credit with this lender?
Yes	No	Yes	No	Are you a U.S. Citizen?
Yes	No	Yes	No	If no, are you a resident alien?
Yes	No	Yes	No	If no, are you a non-resident alien?

**SCHEDULE OF OTHER INCOME**

NOTICE: Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis repaying this obligation.  
 Alimony, child support, separate maintenance received under: Court order Written Agreement Oral Understanding Other

PARTIES: INCOME TYPES A = Alimony/Child Support B = Bonuses C = Commissions I = Interest & Dividends O = Overtime R = Retirement X = Other

App	CoApp	Joint	TYPE	Description	Amount	Frequency

**CREDIT LIFE AND DISABILITY INSURANCE**

Applicant desires the following voluntary insurance: Credit Life Credit Disability  
 Co-Applicant desires the following voluntary insurance: Credit Life Credit Disability

**OTHER MAPLE BANK PRODUCTS/SERVICES**

I/We are interested in more information about the additional products/services:

Maple Bank Checking Account	App	CoApp
Maple Bank Savings Account	App	CoApp
Certificate of Deposit	App	CoApp
ATM & Check Card	App	CoApp
Online Banking	App	CoApp
Overdraft Protection Line of Credit	App	CoApp
Automatic Payment	App	CoApp
Health Savings Account	App	CoApp
Health / Life Insurance Consultation	App	CoApp
Investment Consultation	App	CoApp
MEMBER FDIC	App	CoApp

**APPLICANT SIGNATURE(S)**

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.

APPLICANT:

X \_\_\_\_\_ X \_\_\_\_\_  
 Applicant Date Co-Applicant Date

**FOR LENDER'S USE ONLY**

Officer No. / Name	Approved By	Concurrence By (if needed)	Committee Date	Decision Date
Branch	Application Date	Application No.	Commitment No.	Loan No.

Decision and Comments: Approved Denied Incomplete Counteroffer Conditional Approval Other: \_\_\_\_\_