



CHECK BOX FOR JOINT ACCOUNT: If you are applying for a joint account or an account that you and another person will use, complete all sections, providing information about the Joint Applicant or user. We intend to apply for joint credit.

Applicant _____

Co-Applicant _____

VEHICLE LOAN APPLICATION

Loan Amount Requested:\$		Term:		Interest Rate:		%	
Applicant Information							
Name:			Date of Birth:		SSN:		
City/State of Birth:				Mother's Maiden Name:			
Current Address:							
City:		State:		ZIP:			
Home Phone:		Cell Phone:		Email:			
Own <input type="checkbox"/> Rent <input type="checkbox"/> (Please circle)		Monthly payment (including taxes & Insurance) or rent: \$			How long?		
Previous Address: (if less than 3 years at current address)							
City:		State:		ZIP:			
Owned <input type="checkbox"/> Rented <input type="checkbox"/> (Please circle)		Monthly payment (including taxes & Insurance) or rent: \$			How long?		
Are you currently in the U.S. Military? Yes or No				If yes, are you Active Duty status? Yes or No			
Employment Information							
Current Employer:					How long?		
Employer Address:					Phone:		
Position:		Hourly <input type="checkbox"/> Salary <input type="checkbox"/> (Please circle)		Annual Income: \$			
Previous Employer: (if less than 3 years at employer)							
Address:					How long?		
Phone:				Fax:			
Position:		Hourly <input type="checkbox"/> Salary <input type="checkbox"/> (Please circle)		Annual Income: \$			
Other Income: DO NOT REVEAL income from alimony, child support or separate maintenance payments unless you are relying on such income to repay this account.							
Describe source of other income:				Total Gross Monthly Amount: \$			
Personal Reference							
Name and relationship of a relative not living with you:							
Address:							
City:		State:		ZIP:		Phone:	
Have you ever been bankrupt or had any judgment, liens or legal proceedings against you? Yes No							
Bank Account Information							
Bank Name		Type of Account		Account No.		Current Balance	
Credit References							
Name		Account No.		Current Balance		Monthly Payment	
Vehicle Information (please attach a bill of sale or dealer sheet including all vehicle information)							
Name of Seller:							
Address:							
City:		State:		ZIP:		Phone:	
Vehicle Make:		Vehicle Model:		Options:			
Year:		Mileage:		<input type="checkbox"/> New		<input type="checkbox"/> Used	
Vehicle Identification Number:							
Purchase Price: \$		Down Payment: \$		Amount to be financed: \$			
Name to appear on Title Certificate: (Title holder to sign security agreement)							
Address:							
City:		State:		Zip			
BOAT ONLY Length:				Type: <input type="checkbox"/> Single <input type="checkbox"/> Inboard <input type="checkbox"/> Twin <input type="checkbox"/> I/O			
Engine Make				H.P.		Year	
Boat Registration Number:							
Insurance Information:							
Insurance Agent Name:				Annual Insurance Premium: \$			
Address:							
City:		State:		ZIP:		Phone:	

Co-Applicant Information, if for a joint account			
Name:		Date Birth:	SSN:
City/State of Birth:		Mother's Maiden Name:	
Current Address:			
City:	State:	ZIP:	
Home Phone:	Cell Phone:	Email:	
Own Rent (Please circle)	Monthly payment (including taxes & Insurance) or rent: \$		How long?
Previous Address: (if less than 3 years at current address)			
City:	State:	ZIP:	
Owned Rented (Please circle)	Monthly payment (including taxes & Insurance) or rent: \$		How long?
Are you currently in the U.S. Military? Yes or No		If yes, are you Active Duty status? Yes or No	
Employment Information			
Current Employer:			How long?
Employer Address:			Phone:
Position:	Hourly Salary (please circle)	Annual Income: \$	
Previous Employer: (if less than 3 years at employer)			
Address:			
Phone:		Fax:	
Position:	Hourly Salary (please circle)	Annual Income: \$	
Other Income: DO NOT REVEAL income from alimony, child support or separate maintenance payments unless you are relying on such income to repay this account.			
Describe source of other income:			Total Gross Monthly Amount: \$
Personal Reference			
Name and relationship of a relative not living with you:			
Address:			
City:	State:	ZIP:	Phone:
Have you ever been bankrupt or had any judgment, liens or legal proceedings against you? Yes No			
Bank Account Information			
Bank Name	Type of Account	Account No.	Current Balance
Credit References			
Name	Account No.	Current Balance	Monthly Payment
Authorization for automatic deduction of loan payment:			
<input type="checkbox"/> Please deduct my (our) loan payment automatically from my (our) account number:			
Certification and Signatures:			
I (We) certify that the information stated is complete and accurate, and has been furnished by me (us) knowing that you intend to rely on it in considering my (our) application. I (We) understand that you may request a consumer report in connection with this application and for purposes of updating, renewing or extending further credit, taking collection action on my loan, or other legitimate purposes associated with my loan, and, if I (we) ask, I (we) will be informed whether or not such a report was requested and, if so, the name and address of the consumer reporting agency that furnished the report. I (We) also authorize you to check my (our) employment history.			
Notice to Guarantor:			
If you are providing information to the Lender on this Application for the purpose of acting as a guarantor for one or more primary applicant(s) and the Lender determines that you are a 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 <i>directly</i> to the primary applicant(s) and not to you. As a guarantor, be prepared to share any 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.			
Important information about 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 you for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.			
This application must be signed and dated below before it can be processed:			
Signature of Applicant			Date
Signature of Co-Applicant, if for joint account			Date
Interviewer's Name:	Branch:	Application #:	Date Received:

USA PATRIOT ACT INFORMATION FORM

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 every customer. When applying for a loan, applicants will be asked for their name, address, date of birth and other information that will allow lenders to identify them. Applicants will also be asked to show their driver's license or other identifying documents.

THE FOLLOWING CUSTOMER INFORMATION MUST BE OBTAINED TO BE IN COMPLIANCE WITH THE USA PATRIOT ACT. THIS INFORMATION MUST BE RETAINED FOR FIVE YEARS AFTER THE ACCOUNT IS CLOSED.

Required Information:

Borrower Name: _____

Borrower Mother's Maiden Name: _____ **Borrower Place of Birth:** _____

Method of Identification for Borrower (only one form of verification is required)

- (1) Driver's License: State: _____ DL# _____ Issue Date: _____ Exp. Date: _____
- (2) Passport: # _____ Country: _____ Issue Date: _____ Exp. Date: _____
- (3) Military ID: Country _____ Issue Date: _____ Exp. Date: _____
- (4) State ID: State: _____ # _____ Issue Date: _____ Exp. Date: _____
- (5) Green Card: Country: _____ #: _____ Exp. Date: _____
- (6) Immigration Card: Country: _____ #: _____ Exp. Date: _____
- (7) Gov't ID (VISA): Gov't Branch: _____ #: _____ Exp. Date: _____
- (8) Other Document: _____ Issue Date: _____ Exp. Date: _____

Borrower Signature: _____ **Date:** _____

Co-Borrower Name: _____

Co-Borrower Mother's Maiden Name: _____ **Co-Borrower Place of Birth:** _____

Method of Identification for Co-Borrower (only one form of verification is required)

- (1) Driver's License: State: _____ DL# _____ Issue Date: _____ Exp. Date: _____
- (2) Passport: # _____ Country: _____ Issue Date: _____ Exp. Date: _____
- (3) Military ID: Country _____ Issue Date: _____ Exp. Date: _____
- (4) State ID: State: _____ # _____ Issue Date: _____ Exp. Date: _____
- (5) Green Card: Country: _____ #: _____ Exp. Date: _____
- (6) Immigration Card: Country: _____ #: _____ Exp. Date: _____
- (7) Gov't ID (VISA): Gov't Branch: _____ #: _____ Exp. Date: _____
- (8) Other Document: _____ Issue Date: _____ Exp. Date: _____

Co-Borrower Signature: _____ **Date:** _____