[Closed-end, unsecured/secured credit] CREDIT APPLICATION

erson as the basis fo		me and are relying on your own in equested, complete only Sections a ection E.	
applying for joint If the requested c	credit with another personedit is to be secured, the	on, complete all Sections except I n complete Section E.	, providing in
d to apply for joint	credit.		

income or assets of another person as the basis for repayment of the credit requested, complete all Sections except E to the extent possible, providing information in B about the person on whose alimony, support, or maintenance payments or income or assets you

State: Zip: Telephone: \_\_\_\_\_ Driver's License No.: \_\_\_

and not the income or assets of

requested credit is to be

\_\_\_\_\_\_ Birthdate: / /

Years there:

\_\_ Birthdate: / /

Years there:

	applicant. If the requested credit is to be secured, then complete Section E.				
	We intend to apply for joint credit,	the professional and the second of the secon			

Proceeds of Credit To be Used For

Payment Date Desired

SECTION A-INFORMATION REGARDING APPLICANT

Amount Requested

City: \_\_

Full Name (Last, First, Middle):

Full Name (Last, First, Middle): \_

Social Security No.: \_\_\_

Checking Account No.: \_\_

Name of nearest relative not living with Joint Applicant or Other Party: \_\_\_\_\_

Savings Account No.: \_

Relationship:

Present Street Address:

Relationship to Applicant (if any):

☐ Yes (Explain in detail on a separate sheet.) No ☐

Present Street Address: \_\_

Social Security No.: \_\_\_ Previous Street Address:

secured, a

are relying. If the requested credit is to be secured, then complete Section E.

Appropriate another p

Check ☐ If you are

IMPORTANT: Read these Directions before completing this Application.

\_\_\_\_Years there: \_\_ Present Employer: Position or title: Name of supervisor: \_\_

State: Zip:

City: \_ Telephone: \_\_\_

Employer's Address:

Previous Employer: Years there:

Previous Employer's Address:

Present net salary or commission: \$ \_\_\_\_\_\_ per \_\_\_\_\_ No. Dependents: \_\_\_\_\_ Ages:

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, separate maintenance received under: court order 🔲 written agreement 🗀 oral understanding 🗀 Source(s) of other income: \_ per

Is any income listed in this Section likely to be reduced before the credit requested is paid off? ☐ Yes (Explain in detail on a separate sheet.) No☐

Have you ever received credit from us? \_\_\_\_\_\_ When? \_\_\_\_ Office: \_\_\_\_\_ Institution and Branch: Checking Account No.: \_\_

\_ Institution and Branch: Savings Account No.: Name of nearest relative

not living with you: \_\_

Telephone: Address:

Driver's License No.:

Is any income listed in this Section likely to be reduced before the credit requested is paid off?

Address:

Relationship: \_

SECTION B-INFORMATION REGARDING JOINT APPLICANT, OR OTHER PARTY (Use separate sheets if necessary.)

Present Employer: \_ \_\_\_\_\_ Telephone: \_\_\_\_\_ Years there: Position or title: Name of supervisor: \_\_\_

State: Zip: \_\_\_\_\_ Telephone: \_

Employer's Address: Years there: Previous Employer:

Previous Employer's Address: No. Dependents: Ages: Present net salary or commission: \$ \_\_\_\_\_ per \_\_

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

Alimony, child support, separate maintenance received under: court order 🔲 written agreement 🔲 oral understanding 🗀 \_\_ Source(s) of other income: Other income: \$ \_\_ per\_

Institution and Branch:

Institution and Branch:

Telephone: \_

Closed end, unsecured/secured c							
SECTION C—MARITAL S Do not complete if this is an		l unsecured credit.)					
Applicant:		Unmarried (including s ☐ Unmarried (including					
SECTION D— ASSET ANI	DEBT INFORMATION	(If Section B has been co	ompleted, this Sec	tion should be o	ompleted giving in	nformation abo	
completed, o	licant and Joint Applicant o nly give information about	r Other Person, Please m the Applicant in this Sect	ark Applicant-rela ion.)	ited information	with an "A." If Se	ction B was no	
ASSETS OWNED (use separ	ate sheet if necessary.)		Subjec	t to Debt?			
Description of Assets			Value Ye		s/No Name(s) of Owner(s)		
Cash		S	S				
Automobiles (Make, Model, 1	Year)						
Cash Value of Life Insurance Face Value)	(Issuer,						
Real Estate (Location, Date A	cquired)						
Marketable Securities (Issuer	Type, No. of Shares)				a minimi mano mujete ta dia minimi mjer de ce sinden iligili de consensaba in insur	no de distributo con menera menera menera di mendella se della colo di di distributo di di di di di di di di di	
						en and the second secon	
Other (List)							
Total Assets		s					
OUTSTANDING DEBTS (I				_			
Creditor	Type of Debt or Acct. No.	Name in Which Acct. Carned	Original Debt	Present Balance	Monthly Payments	Past Due? Yes/No	
l. (Landlord or Mortgage Holder)	Rent Payment Mortgage		\$ (Omit rent)	\$ (Omit rent)	s		
2.							
3.							
Total Debts			s	s	s		
(Credit References)				1		Date Paid	
l -			s				
2						The control of the fill of the control of the contr	
Are you a co-maker, endorses guarantor on any loan or cont	t, or ract? Yes □ No	If "yes" □ for whom?	t	To v	vhom?		
Are there any unsatisfied judgments against you?		If "yes" to whom owed?					
Have you been declared		ount \$ /es"	to who	om owed:			
bankrupt in the last 14 years?	No □ whe	re?			Year		
Other Obligations—(E.g., lia	bility to pay alimony, critic	support, separate mainter	iance. Use separat	e sheet if neces	sary.)		
SECTION E—SECURED	CREDIT (Complete only i	f credit is to be secured.	) Briefly describ	e the property	to be given as secu	urity.	
and list names and addresses	of all co-owners of the pron	erty:	erroren e ribinira y errota ki i Ginzanla di kina manana ya kina ki alikuwa				
	Name	300 W		Addre	SS		
If the security is real estate, g	ive the full name of your so	ouse (if any):					
Everything that I have st	ated in this application is co	orrect to the best of my k	nowledge. I under	stand that you v	vill retain this appl	ication whethe	
or not it is approved. You are	authorized to check my cre-	dit and employment histo	ory and to answer	questions about	your credit experi	ence with me.	
Applicant's Signature Date		Date		ner Signature	State of the state	Date	