

CREDIT APPLICATION

IMPORTANT: Please read these directions before completing this Application, and check (X) the appropriate box below.

If you are applying for individual credit in your own name, and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections A and D. If the requested credit is to be secured, also complete the first part of Section C and Section E.

If you are applying for joint credit with another person, complete all Sections except E, providing information in B about the joint applicant. If the requested credit is to be secured, then complete Section E.

WE INTEND TO APPLY FOR JOINT CREDIT: APPLICANT _____ CO-APPLICANT _____

If you are applying for individual credit, but are relying on income from 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 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 are relying. If the requested credit is to be secured, then complete Section E.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding or terrorism and money laundering activities, the USA Patriot Act 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 for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

AMOUNT REQUESTED \$	PAYMENT DATE DESIRED	PROCEEDS OF CREDIT TO BE USED FOR
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SECTION A - INFORMATION REGARDING APPLICANT

FULL NAME (Last, First, Middle)	BIRTH DATE	HOME PHONE	BUSINESS PHONE
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IF U.S. PERSON (Complete all that apply)	DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	EXPIRATION DATE	SOCIAL SECURITY NO.
	STATE ID CARD NO.	STATE	DATE OF ISSUANCE	EXPIRATION DATE	OTHER MILITARY ID; TRIBAL

IF NON U.S. PERSON: (Complete all that apply)	DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	EXPIRATION DATE	STATE ID CARD NO.	STATE OF ISSUANCE
	PASSPORT NO. & COUNTRY OF ISSUANCE	INDIVIDUAL TAXPAYER ID	GOVERNMENT ISSUED DOCUMENT NO.	OTHER		

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box , City, State & Zip) or, IF MILITARY, APO OR FPO ADDRESS OR IF N/A NEXT OF KIN OR FRIEND.	YEARS AT ADDRESS
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PREVIOUS ADDRESS (Street, City, State, & Zip)	YEARS AT ADDRESS	EMAIL ADDRESS
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PRESENT EMPLOYER (Company Name & Address)	OCCUPATION	POSITION	YEARS WITH EMPLOYER	NAME OF SUPERVISOR
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PREVIOUS EMPLOYER (Company Name & Address)	YEARS WITH EMPLOYER
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YOUR PRESENT GROSS SALARY OR COMMISSION \$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER	NO. OF DEPENDENTS	AGES OF DEPENDENTS
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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 received under:	<input type="checkbox"/> Court Order	<input type="checkbox"/> Written Agreement	<input type="checkbox"/> Oral Agreement
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OTHER INCOME \$ PER	SOURCES OF OTHER INCOME	Have you ever received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?
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Is any income listed in this Section likely to be reduced before the credit requested is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes Explain	Checking Acct.#	Where
	Savings Acct. #	Where

Additional Comments Regarding Applicant

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

FULL NAME (Last, First, Middle)			BIRTH DATE	HOME PHONE	BUSINESS PHONE	
IF U.S. PERSON (Complete all that apply)	DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	EXPIRATION DATE	SOCIAL SECURITY NO.	
	STATE ID CARD NO.	STATE	DATE OF ISSUANCE	EXPIRATION DATE	OTHER MILITARY ID; TRIBAL	
IF NON U.S. PERSON: (Complete all that apply)	DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	EXPIRATION DATE	STATE ID CARD NO.	STATE OF ISSUANCE
	PASSPORT NO. & COUNTRY OF ISSUANCE	INDIVIDUAL TAXPAYER ID	GOVERNMENT ISSUED DOCUMENT NO.	OTHER		

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box , City, State & Zip) or, IF MILITARY, APO OR FPO ADDRESS OR IF N/A NEXT OF KIN OR FRIEND.	YEARS AT ADDRESS
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PREVIOUS ADDRESS (Street, City, State, & Zip)	YEARS AT ADDRESS	EMAIL ADDRESS
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PRESENT EMPLOYER (Company Name & Address)	OCCUPATION	POSITION	YEARS WITH EMPLOYER	NAME OF SUPERVISOR
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PREVIOUS EMPLOYER (Company Name & Address)	YEARS WITH EMPLOYER
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YOUR PRESENT GROSS SALARY OR COMMISSION \$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER	NO. OF DEPENDENTS	AGES OF DEPENDENTS
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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 received under:	<input type="checkbox"/> Court Order	<input type="checkbox"/> Written Agreement	<input type="checkbox"/> Oral Agreement
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OTHER INCOME \$ PER	SOURCES OF OTHER INCOME	Have you ever received credit from us? ___ No ___ Yes - When?
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Is any income listed in this Section likely to be reduced before the credit requested is paid off? ___ No Explain ___ Yes	Checking Acct.# Where	Savings Acct. # Where
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SECTION C - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)

APPLICANT	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (Including single, divorced, or widowed)
OTHER PARTY	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (Including single, divorced, or widowed)

Additional Comments Regarding Applicant

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SECTION D - ASSET & DEBT INFORMATION

If Section B has been completed, this Section should be completed, giving information about both the Applicant and Joint Applicant or Other Person.

Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section

DESCRIPTION OF ASSETS	VALUE	SUBJECT TO DEBT? YES/NO	NAMES OF OWNERS
CASH	\$		
AUTOMOBILES (Make, Model, Year)			
CASH VALUE OF LIFE INSURANCE			
REAL ESTATE (Location, Date Acquired)			
MARKETABLE SECURITIES (Issuer, Type, No. of Shares)			
OTHER (List)			
TOTAL ASSETS	\$		

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	PRESENT BALANCE	MONTHLY PAYMENTS	PAST DUE YES/ NO
LANDLORD OR MORTGAGE HOLDER	RENT / MORTGAGE		\$ OMIT RENT	\$OMIT RENT	\$	
TOTAL DEBTS						

CREDIT REFERENCES (Paid off Accounts)	DATE PAID OFF

MY AUTO INSURANCE AGENT IS; (Name & Address)

Are you the co-maker , endorser or guarantor on any loan or contract?	<input type="checkbox"/> No <input type="checkbox"/> Yes - For Whom? _____ To Whom? _____
Are there any unsatisfied judgments against you?	<input type="checkbox"/> No <input type="checkbox"/> Yes - Amount \$ _____ If " Yes ", To Whom Owed? _____
Have you been declared bankrupt in the last 10 years?	<input type="checkbox"/> No <input type="checkbox"/> Yes - Where? _____ Year? _____

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

SECTION E - SECURED CREDIT (Complete only if credit is to be secured.) Briefly describe the property to be given as security:

PROPERTY DESCRIPTION

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (if any) :

CREDIT DISCLOSURES: An insurance product or annuity may be offered to you. If you purchase an insurance product or annuity: (1) The insurance product or annuity is not a deposit or other obligation of , or guaranteed by this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

SIGNATURES

Everything that 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 answer questions about your credit experience with me.

Unless I have purchased the insurance product(s) by mail or if the Credit Disclosures are provided electronically, by signing below, I acknowledge that I have received the Credit Disclosures orally at the time I have applied for credit and fully understand the disclosures noted above. I am also being provided with a copy of these disclosures and I acknowledge receipt by my signature.

APPLICANT'S SIGNATURE

DATE

OTHER SIGNATURE (Where Applicable)

DATE

X

X

FEDERAL CONSUMER CREDIT DISCLOSURES

CREDIT DISCLOSURES: An insurance product or annuity may be offered to you. If you purchase an insurance product or annuity: (1) The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

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