

CONSUMER LOAN APPLICATION (APPCENTER VERSION)

CREDIT REQUESTED			COLLATERAL OFFERED		
Amount Requested	# of Payments	Preferred Payment Day	<input type="checkbox"/> Real Estate	<input type="checkbox"/> Deposit Account/Investments	
			<input type="checkbox"/> Titled / Vehicle	<input type="checkbox"/> Other	<input type="checkbox"/> Unsecured
Description of Collateral Offered					
Purpose of Credit Request					
Loan Type (i.e. Installment, Credit Line)			Credit <input type="checkbox"/> A HELOC <input type="checkbox"/> A Home Equity Loan Requested is: <input type="checkbox"/> A Home Improvement Loan		
APPLICANT			CO-APPLICANT		
If the Applicant is married, he or she may apply for individual credit.					
Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer			Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer		
Name			Name		
Date of Birth		SSN	Date of Birth		SSN
Driver's Lic. #		Exp. Date	Driver's Lic. #		Exp. Date
Home Street Address		Yrs/Mos.	Home Street Address		Yrs/Mos.
City, State, Zip		County	City, State, Zip		County
Home Phone		Cell Phone	Home Phone		Cell Phone
E-Mail Address			E-Mail Address		
# of Dependents		Ages of Dependents	# of Dependents		Ages of Dependents
Previous Address (if current less than 2 years)		Yrs/Mos.	Previous Address (if current less than 2 years)		Yrs/Mos.
City, State, Zip			City, State, Zip		
EMPLOYMENT INFORMATION - APPLICANT			CO-APPLICANT		
Business Name/Employer <input type="checkbox"/> Self Employed			Business Name/Employer <input type="checkbox"/> Self Employed		
Business/Employer Street Address			Business/Employer Street Address		
City, State, Zip			City, State, Zip		
Business Phone		Monthly Income	Business Phone		Monthly Income
Position/Title		From	To	Position/Title	
Previous Business Name/Employer <input type="checkbox"/> Self Employed			Previous Business Name/Employer <input type="checkbox"/> Self Employed		
Business/Employer Street Address			Business/Employer Street Address		
City, State, Zip			City, State, Zip		
Business Phone		Monthly Income	Business Phone		Monthly Income
Position/Title		From	To	Position/Title	

PERSONAL REFERENCES - APPLICANT		CO-APPLICANT	
Name	Relationship	Name	Relationship
Address	Phone	Address	Phone
Name	Relationship	Name	Relationship
Address	Phone	Address	Phone
Name	Relationship	Name	Relationship
Address	Phone	Address	Phone

ABOUT YOUR EXISTING LOANS AND ACCOUNTS

Rent Home Own Home in the following names:

Monthly Payment / Rent \$	Purchase Price	Date Purch.	Present Value	Original Loan Amount	Current Loan Balance
Name and Address of Mortgage Holder or Landlord					
Name of My Financial Institution			Checking Account #	Savings Account #	

OTHER INCOME (IF ANY) - Indicate Monthly Values (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.)

Interest / Dividends \$	Rental Income \$	Other Income \$	Describe "Other Income" Source

ASSETS LOANS OR OTHER OBLIGATIONS

Category	Value	Category	Amt Owed	Monthly Payment
Cash/Deposits	\$			
Stocks or Bonds	\$			
Automobiles	\$	Auto Loans	\$	\$
Real Estate	\$	Real Estate Loans	\$	\$
Life Insurance (Face Value: \$)	\$	Life Insurance Loans	\$	\$
Retirement Funds	\$	Credit Card Debt	\$	\$
Other Assets	\$	Other Obligations	\$	\$
Total Assets	\$	Total Liabilities	\$	\$
		Net Worth	\$	

QUESTIONS

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

APPLICANT SIGNATURES

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.

We intend to apply for joint credit

_____ (Initial)

_____ (Initial)

Applicant

Co-Applicant

APPLICANT:

X _____
Applicant Date

X _____
Co-Applicant Date

TO BE COMPLETED BY INTERVIEWER

Application Taken By: Face to Face Interview Mail Telephone Internet

Interviewer

Interviewer's Phone

Interviewer's Employer Name/Address

First Green Bank, 1301 S Bay Street, Eustis, FL 32726

App #

Branch

Product

Market Survey