

FIRST NATIONAL BANK & TRUST COMPANY

CONSUMER LOAN APPLICATION

Credit Requested Is: <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Collateral Secured Loan <input type="checkbox"/> Personal Unsecured Loan	Account Requested: <input type="checkbox"/> Individual <input type="checkbox"/> Joint
Amount Requested	Description of Collateral Offered
We intend to apply for joint credit	
Initial	
Purpose of Credit Request	Applicant Co-Applicant

Applicant	Co-Applicant
APPLICANT INFORMATION	
Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor	Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor
Applicant Name (include Jr. or Sr. if applicable)	Co-Applicant Name (include Jr. or Sr. if applicable)
Social Security Number Home Phone (incl. area code) DOB (mm-dd-yyyy)	Social Security Number Home Phone (incl. area code) DOB (mm-dd-yyyy)
Email Address	Email Address
Dependents (not listed by Co-Applicant) no. ages	Dependents (not listed by Applicant) no. ages
Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien	Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien
Present Address (street, city, state, ZIP) since	Present Address (street, city, state, ZIP) since
Mailing Address, if different from Present Address	Mailing Address, if different from Present Address
If residing at present address for less than two years, complete the following:	
Former Address (street, city, state, ZIP) from to	Former Address (street, city, state, ZIP) from to

Applicant	Co-Applicant
EMPLOYMENT / INCOME INFORMATION	
Name & Address of Employer <input type="checkbox"/> Self Employed	Name & Address of Employer <input type="checkbox"/> Self Employed
Yrs. on this job <input type="checkbox"/> Full time	Yrs. on this job <input type="checkbox"/> Full time
Position/Title & Type of Business Business Phone (incl. area code)	Position/Title & Type of Business Business Phone (incl. area code)
Gross Monthly Income	Gross Monthly Income
Name & Address of Employer <input type="checkbox"/> Self Employed	Name & Address of Employer <input type="checkbox"/> Self Employed
Dates from to	Dates from to
Position/Title & Type of Business Business Phone (incl. area code)	Position/Title & Type of Business Business Phone (incl. area code)
Name & Address of Employer <input type="checkbox"/> Self Employed	Name & Address of Employer <input type="checkbox"/> Self Employed
Dates from to	Dates from to
Position/Title & Type of Business Business Phone (incl. area code)	Position/Title & Type of Business Business Phone (incl. area code)

NOTICE: 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.

Other Income	Other Income
Other Income	Other Income
Other Income	Other Income

HOUSING INFORMATION			
<input type="checkbox"/> Own <input type="checkbox"/> Rent since	Monthly Housing/Rent \$	Present Value \$	Date Purchased

CASH ASSET INFORMATION		
Financial Institution Name	Saving Account Balance \$	Checking Account Balance \$

CREDIT DISCLOSURES: An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity (1) The insurance product 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 your from obtaining, and insurance product or annuity from an unaffiliated entity.

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 issuer or 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.

x _____ Applicant	_____ Date	
x _____ Co-Applicant	_____ Date	