



Credit Application

Application Taken By: Phone Fax Face To Face

TYPE OF CREDIT REQUESTED

Important: Initial the appropriate boxes below and complete the application sections.

(Initials) INDIVIDUAL CREDIT – relying solely on my income or assets

(Initials) (Initials) JOINT CREDIT– We intend to apply for joint credit.

relying on my income or assets as well as income from other sources

SECURED

UNSECURED

Application Date:	Loan Purpose:
Amount Requested: \$	Length:
Payment Date Desired:	
Secured Credit- Complete <i>only</i> if credit is to be secured. Briefly describe the property below to be given as security	

INDIVIDUAL APPLICANT INFORMATION

Last Name	First Name	Initial	Social Security Number	Date of Birth	No. Dependents
Street Address	City	State	Zip	How Long? yr mo	Phone Number
Mailing Address (if different)	City	State	Zip	Cell Phone Number	
Previous Address (if less than 3 years at present address)	City	State	Zip	E-Mail Address	
Name and Address of Nearest Relative Not Living with You	Relationship	Phone Number			

EMPLOYMENT INFORMATION

Current Employer	Position or Title	Phone Number
Address	How Long? yr mo	Salary Per Month Gross \$ Net \$
Previous Employer (Company Name and Address)	How Long? yr mo	
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.	Source of Other Income	Amount Per Month \$

CO-APPLICANT GUARANTOR

Complete only if: for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property state.

Last Name	First Name	Initial	Social Security Number	Date of Birth	Relationship
Street Address	City	State	Zip	Phone Number	
Current Employer	Position or Title	Phone Number			
Address	How Long? yr mo	Salary Per Month Gross \$ Net \$			
Previous Employer (Company Name and Address)	How Long? yr mo				

ASSET & DEBT INFORMATION

Description of Assets	Name of Financial Institution	Value
Checking Account(s)/Savings Account(s)		\$
Certificate of Deposit(s)		\$
Life Insurance, Stocks, Bonds, Mutual Funds		\$
Rent Own Other _____ Contract for Deed	Landlord or Mortgage Company Purchase Price Account Number	Value \$ Payment \$
Other Creditors	Type of Loan	Account Holder Name
		Balance
		Payment

Complete the following information about both the Applicant and Joint applicant or Other Person (if applicable)

Are you obligated to make Alimony, Support, or Maintenance payments? Yes No	If yes, amount per month \$
Are you a co-maker, endorser, or guarantor on any loan or contract? Yes No	Have you declared bankruptcy in the last 7 years? Yes No When
Are there any unsatisfied judgments/collections against you? Yes No	Have you previously received credit from us? Yes No When

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I. I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. Federal law prohibits you from conditioning the extension of credit on either:
 A. My purchase of an insurance product or annuity from you or from any of your affiliates; or
 B. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an affiliated entity. By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

ARKANSAS CREDIT APPLICATION INSURANCE DISCLOSURE - I have applied for an extension of credit from you. You are offering, selling, or requiring insurance as a part of the extension of credit. Your choice of an insurer or producer shall not affect our credit decision or credit terms in any way. However, we may impose reasonable requirements concerning the creditworthiness of the insurer and the scope of the coverage chosen. By signing, I acknowledge that I have received a copy of this disclosure on today's date.

PLEASE READ CAREFULLY - In considering this loan request from you, the bank will rely heavily on the information you have supplied. It is most important that the information be accurate and complete. By signing this application, you represent and warrant the accuracy of the information. This application shall remain the property of the bank whether the account is granted or not. By signing below I authorize you to check my credit and employment history and to answer any questions others may ask of you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

Guarantor Signature _____ Date _____

Approved _____ Denied _____	Date _____	Notes:
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