PERSONAL LOAN APPLICATION

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

First Texoma National Bank
The neighborhood bank you can count on.

To help the government fight the funding of terrorism and money laundering activities, Federal law 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, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

IMPORTANT: Read these Directions before completing this Application. Check the Appropriate Box.

☐ **If you are applying for individual credit or an individual account, 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-D. If the requested credit or account is to be secured, also complete the first part of Section F.**

☐ **If you are applying for joint credit with another person or for a joint account or an account that you and another person will use, complete all Sections, providing information in Section E about the joint applicant.**

We intend to apply for joint credit. Applicant _____ Co-Applicant _____

☐ **If you are applying for individual credit or an individual account, 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 to the extent possible, providing information in Section E about the person on whose alimony, support, or maintenance payments or income or assets you are relying.**

SECTION A - APPLICANT

NAME *(Please print full name)*	HOME PHONE	CELL PHONE	AMOUNT OF LOAN REQUESTED	REQUESTED MOS. TO PAY
PRESENT STREET ADDRESS	HOW LONG AT THIS ADDRESS:		PURPOSE OF LOAN	
CITY, STATE AND ZIP	E-MAIL ADDRESS:		COLLATERAL OFFERED AND HOW OWNED	
IMMEDIATE PREVIOUS ADDRESS	HOW LONG AT THIS ADDRESS:			
CITY AND STATE	ZIP		Have you ever applied to us for a loan? ☐ Yes ☐ No If Yes, When?	
SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER - STATE	BIRTH DATE	NO. OF DEPENDENTS - LIST BY AGE	

NAME, ADDRESS AND RELATIONSHIP OF TWO NEAREST RELATIVES *NOT* LIVING WITH YOU OTHER THAN A PRESENT OR FORMER SPOUSE | ARE YOU A U.S. CITIZEN? ☐ Yes ☐ No

MY PRINCIPAL FINANCIAL INSTITUTION IS: Services presently used: ☐ Checking Account No. ☐ Savings Account No. ☐ Safe Deposit ☐ Loan ☐ Cert. of Deposit | OTHER FINANCIAL INSTITUTIONS USED

SECTION B - INCOME AND EMPLOYMENT

PRESENT EMPLOYER		SALARY AND WAGES	Monthly Income
EMPLOYER ADDRESS	BUSINESS PHONE	OTHER INCOME- From Whom or Describe (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)	
POSITION OR TITLE	DATE OF EMPLOY		
PREVIOUS EMPLOYER AND ADDRESS			
POSITION OR TITLE	YEARS EMPLOYED	TOTAL MONTHLY INCOME	

Is any income listed in this Section likely to be reduced in the next two years or before the credit requested is paid off?
☐ No ☐ Yes (Explain in detail, use separate sheet if needed): _____

If you have chosen to disclose income from alimony, child support or separate maintenance, is such income pursuant to: ☐ Written Agreement ☐ Court Decree ☐ Other	How Long Received	How Often	From Whom

SECTION C - ASSETS

AUTOS *(Make, Model, Year)* VALUE	VALUE	VALUE	TOTAL VALUE
REAL ESTATE *(Location)*	DATE OCCUPIED	VALUE	
REAL ESTATE *(Location)*	DATE OCCUPIED	VALUE	
LIFE INSURANCE *(Name each Company)*	FACE VALUE	CASH VALUE	
OTHER ASSETS *(Describe)*		ESTIMATED VALUE	
AUTO INSURANCE AGENTS: *(Name and Address)*		TOTAL ASSETS	

SECTION D - LIABILITIES AND INDEBTEDNESS

List below all indebtedness to banks, credit unions, stores, finance companies, individuals and other creditors, including obligations to pay alimony, child support, separate maintenance, rent, mortgages, etc.

CREDITOR	TYPE OF DEBT	ORIGINAL DEBT	PRESENT AMOUNT OWED	COLLATERAL	MONTHLY PAYMENT
Total Liabilities and Monthly Payments					

Have you ever been bankrupt or had any judgments or garnishments against you? ☐ NO ☐ YES - WHEN?

SECTION E - JOINT APPLICANT, USER OR OTHER PARTY (Use separate sheets, if needed.)

If this Section of Application is completed, the indebtedness of Co-Applicant/Guarantor/Endorser must be shown under the "Liabilities and Indebtedness" Section above. (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)

NAME AND RELATIONSHIP TO APPLICANT	ADDRESS	☐ CO-APPLICANT ☐ CO-SIGNER ☐ GUARANTOR ☐ ENDORSER				
EMPLOYED BY	HOW LONG	POSITION OR TITLE	BUSINESS PHONE	HOME PHONE	SOCIAL SECURITY NUMBER	BIRTH DATE
MONTHLY INCOME	OTHER INCOME			TOTAL INCOME $	DRIVERS LICENSE NUMBER - STATE	

Is any income listed in this Section likely to be reduced in the next two years or before the credit requested is paid off?
☐ No ☐ Yes (Explain in detail, use separate sheet if needed):

NAME, ADDRESS AND RELATIONSHIP OF TWO NEAREST RELATIVES *NOT* LIVING WITH YOU OTHER THAN A PRESENT OR FORMER SPOUSE | ARE YOU A U.S. CITIZEN? ☐ Yes ☐ No

MY PRINCIPAL FINANCIAL INSTITUTION IS: Services presently used: ☐ Checking Account No. ☐ Savings Account No. ☐ Safe Deposit ☐ Loan ☐ Cert. of Deposit | OTHER FINANCIAL INSTITUTIONS USED

SECTION F - MARITAL STATUS

APPLICANT: ☐ Married ☐ Separated ☐ Unmarried (including single, divorced, and widowed) | OTHER PARTY: ☐ Married ☐ Separated ☐ Unmarried (including single, divorced, and widowed)

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 loan is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.

APPLICANTS SIGNATURE

X_____ _____ DATE

CO-APPLICANT/CO-SIGNER/GUARANTOR/ENDORSER SIGNATURE *(Where Applicable)*

X_____ _____ DATE

Form 03 0642 1
(Non-community Property)

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