## HOME EQUITY LINE OF CREDIT APPLICATION



Home Equity Line of Credit with a minimum request of \$2,500 and a maximum of \$50,000. This product is available for first and second mortgages for primary residences in Choctaw, Bryan, Marshall or Atoka Counties. Loan is subject to credit approval. Other restrictions may apply. Customer must establish or have an already existing noninterest bearing checking account with First Texoma National Bank

of the credit requested (Init								
Please check here if you are applying for j	oint credit with another p	erson and pi	rovide informatio	n about the joint	applicant. We i	ntend to app	ply for joint credit	(Initial h
Applicant				Co-Applicant				
Terms Requested		Purpose of Loan: Home Improvement Debt Consolidation						
Amount \$				Vacation	on Med	ical 🔲	Other	
Collateral Property Address,						/ear Built	Insu	rance Carrier
City, State, Zip								
Name of Mortgage Holder	Date A	cquired	Purchase \$	Price of Home	Monthly P \$	ayment	Present Value \$	Balance Owed \$
Borrower Information								
First Name		M.I	l.	Last Name	Э			
ssn _	-					DOB		
Street Address		City				State	Zip	
Home Phone	Business	s Phone			Alterna	te		
Email Address			Contact me a	at Home	: W	ork	Best time to call	
Total Gross Yearly Income (Income Before Taxes) \$			Come (Do not list epaying the loan		ort or separate ma		J Layments if you do not wish ource	to have it considered a
Current Employer				Number of Yea	rs			
Co-Borrower Information							·	
First Name		M.I		Last Name	•			
SSN _	-					DOB		
Street Address		City				State	Zip	
Home Phone	Business	Phone			Alternat	е		
Email Address			Contact me a	at Home	☐ Wo	ork	Best time to call	
Total Gross Yearly Income Income Before Taxes) \$		1	come (Do not list a		ort or separate ma		yments if you do not wish	to have it considered as
Current Employer				Number of Yea	rs			
Deposit Accounts							I	
Bank/Financial Institution							Checkin	ng Savings
Bank/Financial Institution							Checkir	ng Savings
Outstanding Debt (The following are all of the	ne loans or debt you presently	owe, including	alimony, child suppo	rt, or separate maint	enance payment w	hich you are ol	bligated to make. Attach ac	dditional sheets if necessa
Debts/Owed to Whom	Present E	Balance	Monthly Payn	nent Collater	al/Purpose	To	o be paid, consolidated	
	\$						Yes	□ No
	\$		\$			<del></del>	Yes	No No
	\$		\$				Yes	No
			\$				Yes	— □ No

Co-Borrower Date Borrower Date