

# FIRST STATE BANK OF COLFAX

100 NORTH WALNUT STREET  
COLFAX, IA 50054

## CREDIT APPLICATION

<b>TYPE OF CREDIT REQUESTED</b> <input type="checkbox"/> SECURED <input type="checkbox"/> INDIVIDUAL CREDIT - based on only my income/assets <input type="checkbox"/> UNSECURED <input type="checkbox"/> INDIVIDUAL CREDIT - based on my income/assets as well as income/assets from other sources <input type="checkbox"/> We intend to apply for joint credit _____ <small>(Each applicant should sign their initials for joint credit)</small>				<b>FOR CREDITOR USE</b> DATE _____ CLASS# _____ ACCOUNT# _____ APPROVED <input type="checkbox"/> BY _____ DECLINED <input type="checkbox"/> BY _____	
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AMOUNT REQUESTED \$ _____	TIME LENGTH NEEDED _____	DESIRED PMT DATE _____	PMT FREQUENCY <input type="checkbox"/> MONTHLY <input type="checkbox"/> _____	PURPOSE OF LOAN: _____
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### SECTION A - INDIVIDUAL APPLICANT INFORMATION

LAST NAME		FIRST NAME with MIDDLE INITIAL		SOCIAL SECURITY #		DRIVER'S LICENCE #	
DATE OF BIRTH	HOME PHONE #	WORK PHONE #		CELL PHONE #	# OF DEPENDENTS & AGES		
ADDRESS (STREET, CITY, STATE & ZIP - PO BOX IS NOT AN ACCEPTABLE ADDRESS)				COUNTY	DO YOU OWN <input type="checkbox"/>	HOW LONG	
PREVIOUS ADDRESS (STREET, CITY, STATE & ZIP)				COUNTY	OR RENT <input type="checkbox"/>	HOW LONG	
EMPLOYER (COMPANY NAME & ADDRESS)						HOW LONG	
BUSINESS PHONE #		POSITION/TITLE		SALARY PER MONTH			
PREVIOUS EMPLOYER (COMPANY NAME & ADDRESS)				GROSS: \$	NET: \$		
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU				RELATIONSHIP		PHONE # (FULL 10 DIGITS)	
<b>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.</b>							
ALIMONY, CHILD SUPPORT, SEPARATE MAINTENANCE RECEIVED UNDER: <input type="checkbox"/> ORAL UNDERSTANDING <input type="checkbox"/> COURT ORDER <input type="checkbox"/> WRITTEN AGREEMENT							
SOURCES OF OTHER INCOME					AMOUNT PER MONTH		
IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT IS PAID OFF? <input type="checkbox"/> NO <input type="checkbox"/> YES (EXPLAIN)					HAVE YOU HAD A LOAN WITH US BEFORE? <input type="checkbox"/> NO <input type="checkbox"/> YES (WHEN)		

### SECTION B - JOINT APPLICANT OR OTHER PARTY (COSIGNOR) INFORMATION

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 with MIDDLE INITIAL		SOCIAL SECURITY #		DRIVER'S LICENCE #	
DATE OF BIRTH	HOME PHONE #	WORK PHONE #		CELL PHONE #	# OF DEPENDENTS & AGES		
ADDRESS (STREET, CITY, STATE & ZIP - PO BOX IS NOT AN ACCEPTABLE ADDRESS)				COUNTY	DO YOU OWN <input type="checkbox"/>	HOW LONG	
PREVIOUS ADDRESS (STREET, CITY, STATE & ZIP)				COUNTY	OR RENT <input type="checkbox"/>	HOW LONG	
EMPLOYER (COMPANY NAME & ADDRESS)						HOW LONG	
BUSINESS PHONE #		POSITION/TITLE		SALARY PER MONTH			
PREVIOUS EMPLOYER (COMPANY NAME & ADDRESS)				GROSS: \$	NET: \$		
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU				RELATIONSHIP		PHONE # (FULL 10 DIGITS)	
<b>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.</b>							
ALIMONY, CHILD SUPPORT, SEPARATE MAINTENANCE RECEIVED UNDER: <input type="checkbox"/> ORAL UNDERSTANDING <input type="checkbox"/> COURT ORDER <input type="checkbox"/> WRITTEN AGREEMENT							
SOURCES OF OTHER INCOME					AMOUNT PER MONTH		
IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT IS PAID OFF? <input type="checkbox"/> NO <input type="checkbox"/> YES (EXPLAIN)					HAVE YOU HAD A LOAN WITH US BEFORE? <input type="checkbox"/> NO <input type="checkbox"/> YES (WHEN)		

### SECTION C - MARITAL STATUS

COMPLETE ONLY FOR JOINT OR SECURED CREDIT, OR APPLICANT RESIDES IN A COMMUNITY PROPERTY STATE OR IS RELYING ON PROPERTY LOCATED IN SUCH STATE AS BASIS FOR REPAYMENT OF CREDIT REQUESTED.

APPLICANT	<input type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> UNMARRIED (INCLUDING SINGLE, DIVORCED, AND WIDOWED)
OTHER PARTY	<input type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> UNMARRIED (INCLUDING SINGLE, DIVORCED, AND WIDOWED)

## SECTION D - ASSET & DEBT INFORMATION

IF SECTION B HAS BEEN COMPLETED, THIS SECTION SHOULD BE COMPLETED GIVING INFORMATION ABOUT BOTH THE APPLICANT & JOINT APPLICANT OR OTHER PERSON PLEASE MARK APPLICANT-RELATED INFORMATION WITH AN "A". IF SECTION B WAS NOT COMPLETED, ONLY GIVE INFORMATION ABOUT THE APPLICANT IN THIS SECTION.

ASSETS OWNED (USE SEPARATE SHEET IF NECESSARY)				
DESCRIPTION OF ASSETS	ACCOUNT # (IF USED AS COLLATERAL FOR PRE-EXISTING DEBT, MARK WITH "D")	NAME OF INSTITUTION & ADDRESS WHERE HELD, ISSUER, LOCATION OF PROPERTY, ETC.	NAME UNDER WHICH ITEM IS TITLED	VALUE
CHECKING ACCOUNT				
SAVINGS ACCOUNT				
TIME CERTIFICATES				
MARKETABLE SECURITIES (TYPE, # OF SHARES)				
REAL ESTATE (DATE ACQUIRED)				
LIFE INSURANCE (STATE FACE VALUE)				
AUTOMOBILES (MAKE, MODEL, YEAR)				
TOTAL ASSETS				

OUTSTANDING DEBTS (INCLUDE CHARGE ACCOUNTS, INSTALLMENT CONTRACTS, CREDIT CARDS, RENT, MORTGAGES & OTHER OBLIGATIONS. USE SEPARATE SHEET IF NECESSARY)					
DESCRIPTION OF DEBT	ACCOUNT #	NAME & ADDRESS WHERE DEBT IS ISSUED, HELD OR SECURED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PMTS
CREDITOR					
LANDLORD OR MORTGAGE HOLDER					
AUTOMOBILES (DESCRIBE)					
TOTAL DEBTS					
NET WORTH					

ARE YOU OBLIGATED TO MAKE ALIMONY, SUPPORT OR MAINTENANCE PAYMENTS?	NO	YES
IF YES, TO (NAME & ADDRESS)		AMT. PER MONTH \$
ARE YOU A CO-SIGNOR, ENDORSER, OR GUARANTOR ON ANY LOAN OR CONTRACT?	NO	YES TO WHOM?
ARE THERE ANY UNSATISFIED JUDGMENTS AGAINST YOU?	NO	YES AMOUNT?
HAVE YOU BEEN DECLARED BANKRUPT IN THE LAST 10 YEARS?	NO	YES IF YES, WHERE?

## SECTION E - SECURED CREDIT

COMPLETE ONLY IF CREDIT IS TO BE SECURED. BRIEFLY DESCRIBE THE PROPERTY TO BE GIVEN AS SECURITY.

PROPERTY DESCRIPTION
NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY
IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (IF ANY)

**SIGNATURES** | I CERTIFY THAT EVERYTHING I HAVE STATED IN THIS APPLICATION AND ON ANY ATTACHMENTS IS CORRECT. YOU MAY KEEP THIS APPLICATION WHETHER OR NOT IT IS APPROVED. BY SIGNING BELOW I AUTHORIZE YOU TO CHECK MY CREDIT AND EMPLOYMENT HISTORY AND TO ANSWER QUESTIONS OTHERS MAY ASK YOU ABOUT MY CREDIT RECORD WITH YOU. I UNDERSTAND THAT I MUST UPDATE CREDIT INFORMATION AT YOUR REQUEST IF MY FINANCIAL CONDITION CHANGES.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ OTHER SIGNATURE (WHERE APPLICABLE) \_\_\_\_\_ DATE \_\_\_\_\_  
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