

# Consumer Loan Application

## Individual or Joint Credit

I/We are applying for \$ _____ on _____ (date) with The Bank of Tioga.		
<input type="checkbox"/> I am applying for individual credit in my own name and I am Relying on my own income and assets and not the income or assets of another person. <input type="checkbox"/> I am applying for individual credit and I am relying on my income or assets, as well as income or assets from other sources. <input type="checkbox"/> We are applying for joint credit.		
Signature(s): _____		
Amount applied for \$ _____	Purpose of loan _____	<b>FOR OFFICE USE ONLY</b> Rate _____ % Monthly PMT. \$ _____ TERM _____

**A**

## Information Regarding Applicant

Full Name		Date of Birth	Social Security No.	
Present Address (Include City & Zip Code)		How Long There ____Yrs. ____Mos.	Telephone No.	
Previous Address (Include City) If Above Address is Less Than Two Years			Years There	
Name & Address of Current Employer			Telephone No.	
Occupation or Position	How Long There ____Yrs. ____Mos.	Monthly Earnings ____Net ____Gross	Permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name and Address of Previous Employer (If above is less than two years)			How Long There ____Yrs. ____Mos.	
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 the obligation, Alimony, child support, separate, maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Oral Understanding <input type="checkbox"/> Written Agreement				
Source of Other Income (Explain)			Other Income Per Month \$ _____	
Name and Address of Nearest Relative Not Living With You			Relationship	
E-Mail				

**B**

## Information Regarding Joint Applicant or Other Party

Full Name		Date of Birth	Social Security No.	
Present Address (Include City & Zip Code)		How Long There ____Yrs. ____Mos.	Telephone No.	
Previous Address (Include City) If Above Address is Less Than Two Years			Years There	
Name & Address of Current Employer			Telephone No.	
Occupation or Position	How Long There ____Yrs. ____Mos.	Monthly Earnings ____Net ____Gross	Permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name and Address of Previous Employer (If above is less than two years)			How Long There ____Yrs. ____Mos.	
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 the obligation, Alimony, child support, separate, maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Oral Understanding <input type="checkbox"/> Written Agreement				
Source of Other Income (Explain)			Other Income Per Month \$ _____	
Name and Address of Nearest Relative Not Living With You			Relationship	
E-Mail				

**C**

## Marital Status (Do not complete if this is an application for an individual account.)

Applicant: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Including Single, Divorced and Widowed)	Number of Dependents
Other Party: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Including Single, Divorced and Widowed)	

**D**

## Secured Credit Briefly Describe the Property to be Given as Security:

And list the names and addresses of all co-owners of the property: Name(s): _____ Addresses: _____
If the security is real estate, give the full name of your spouse (if any): _____



# Asset and Debt Information

(If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Person. Please mark Applicant-related information with an "A." If Section B was not completed, give only information about the Applicant in this Section.)

Home				
<input type="checkbox"/> Renting Furnished <input type="checkbox"/> Renting Unfurnished	Landlord or Mortgage Holder	Purchase Price Down Payments	Rent or Mtg. Pymt. Incl. Taxes and Ins. \$	Bal Owed on 1st Mtg. \$
<input type="checkbox"/> Buying or Owns <input type="checkbox"/> Other	Home Improv. Loan or 2nd Mortgage Loan Creditor	Customers Estimated Value of Property	2nd Mtg. Pymt. \$	Bal Owed on 2nd Mtg. \$

Auto			Checking & Savings Account		
Yr. Auto	Make	Model	<input type="checkbox"/> Paid For <input type="checkbox"/> Financed	Checking	No.
Yr. Auto	Make	Model	<input type="checkbox"/> Paid For <input type="checkbox"/> Financed	Checking	No.
Yr. Auto	Make	Model	<input type="checkbox"/> Paid For <input type="checkbox"/> Financed	Savings	No.
Auto Physical Damage Insurance Carrier			Exp. Date	Savings	No.

Agent's Name & Address

**Debts** These are Stores, Banks, Savings, & Loans, Finance Companies and People with whom you have had credit and shows all your present obligations. If more room is needed, use a separate sheet of paper.

Name of Creditor	Address	Secured By	Interest Rate	Account No.	Balance Owing (Show Date if Closed)	Monthly Pymt.
<b>Total Debts</b>						

Are you a co-maker, endorser or guarantor on any loan or contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes" for whom?	To whom?
Are there any unsatisfied judgments against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	If "yes" to whom owed?
Have you been declared bankrupt in the last 14 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes" where?	Year
Have you ever comprised any debts?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes" to whom?	
Other obligations - (e.g. liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)			

I hereby authorize the person or firm to whom this application is made, any credit bureau or other investigative agency employed by such person, to investigate the references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility. Please read before signing application.

Signature of Applicant	Date
Signature of Joint Applicant	Date

For Office Use Only			
Total Monthly Payments (Including rent or mortgage, and proposed new payment)	Customer _____	Approved _____	Date _____
Divided by NET/GROSS Income	_____	Declined _____	_____
Percent of debt to monthly income	_____	_____	_____