



PERSONAL LOAN APPLICATION

LOAN INFORMATION

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|---|----------------------|----------------------|
| I am interested in the following account: <input type="checkbox"/> Automobile <input type="checkbox"/> Installment Loan <input type="checkbox"/> Personal Line of Credit | | Purpose of the Loan: |
| Loan Amount Requested: | Loan Term Requested: | Collateral Offered: |

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT:

To help the government fight the funding of terrorism and money laundering activities, beginning October 1, 2003, 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 information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

PRIMARY APPLICANT

| | | |
|---|---|--|
| Full Name: | | Date of Birth: |
| Government Issued ID Number: | | Type: <input type="checkbox"/> SSN <input type="checkbox"/> EIN <input type="checkbox"/> Other (identify): |
| Street Address: <i>(Your PO Box may be used for the mailing address below; however, we require a physical street address also):</i> | | Mailing Address: |
| City/State/Zip: | | City/State/Zip: |
| Previous Address: | | Total Months at Current Residence: |
| City/State/Zip: | | Total Months at Previous Residence: |
| Driver's License Number: | State Where Issued: | Expiration Date: |
| Home Phone: | | Cell Phone: |
| Personal Email Address: | | Mother's Maiden Name: |
| Number of Dependents: | Type of Housing Payment: <input type="checkbox"/> Mortgage <input type="checkbox"/> Rent <input type="checkbox"/> None | Monthly Payment Amount: |

PRIMARY APPLICANT EMPLOYMENT INFORMATION

| | |
|-------------------------------------|---|
| Employer: | Employer's Address: |
| Employment Start Date (mm/dd/yyyy): | Work Email Address: |
| Occupation: | Years in Current Profession: |
| Work Phone: | Work Fax: |
| Total Gross Income* (before taxes): | Frequency: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly |
| Other Total Gross Income*: | Other Total Gross Income Frequency: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly |

***Notice:** Alimony, child support, or separate maintenance income need not be revealed if the Primary Applicant and/or Joint Applicant does not wish to have it considered as a basis for repaying this loan. The applicant(s) acknowledges that all information will be verified and consumer credit agencies will be utilized to evaluate this application. Each applicant opening an account agrees to be governed by all policies and regulations of Resurgens Bank.

☐ **NOTICE – JOINT CREDIT.**

We intend to apply for joint credit. (initials) _____

I certify that everything I have stated in this application and on any attachments is correct. Lender may keep this application whether or not it is approved. By signing below, I authorize Lender to check my credit and employment history, to have a consumer credit report prepared on me for the purpose of evaluating this application for

credit, and to answer questions others may ask Lender about my credit record with Lender. I understand that I must update this credit information at Lender's request and if my financial condition changes.

JOINT APPLICANT

| | | |
|---|---|-------------------------|
| Full Name: | | Date of Birth: |
| Government Issued ID Number: | Type: <input type="checkbox"/> SSN <input type="checkbox"/> EIN <input type="checkbox"/> Other (identify): | |
| Street Address: <i>(Your PO Box may be used for the mailing address below; however, we require a physical street address also):</i> | Mailing Address: | |
| City/State/Zip: | City/State/Zip: | |
| Previous Address: | Total Months at Current Residence: | |
| City/State/Zip: | Total Months at Previous Residence: | |
| Driver's License Number: | State Where Issued: | Expiration Date: |
| Home Phone: | Cell Phone: | |
| Personal Email Address: | Mother's Maiden Name: | |
| Number of Dependents: | Type of Housing Payment: <input type="checkbox"/> Mortgage <input type="checkbox"/> Rent <input type="checkbox"/> None | Monthly Payment Amount: |

JOINT APPLICANT EMPLOYMENT INFORMATION

| | |
|-------------------------------------|---|
| Employer: | Employer's Address: |
| Employment Start Date (mm/dd/yyyy): | Work Email Address: |
| Occupation: | Years in Current Profession: |
| Work Phone: | Work Fax: |
| Total Gross Income* (before taxes): | Frequency: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly |
| Other Total Gross Income*: | Other Total Gross Income Frequency: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly |

***Notice:** Alimony, child support, or separate maintenance income need not be revealed if the Primary Applicant and/or Joint Applicant does not wish to have it considered as a basis for repaying this loan. The applicant(s) acknowledges that all information will be verified and consumer credit agencies will be utilized to evaluate this application. Each applicant opening an account agrees to be governed by all policies and regulations of Resurgens Bank.

REFERRAL INFORMATION

| | |
|--|--|
| Referred By: | How did you hear about Resurgens Bank? <input type="checkbox"/> Radio <input type="checkbox"/> Newspaper <input type="checkbox"/> BankRate.com <input type="checkbox"/> Friend <input type="checkbox"/> Other (please identify): |
| Would you like to receive rate information and product updates by email? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If yes, Would you like to receive such correspondence at your <input type="checkbox"/> Personal or <input type="checkbox"/> Work email address listed above? | |

COMMENTS

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| | |
| Applicant's Signature: | Date: |
| Joint Applicant's Signature: | Date: |