

**CONSUMER
LOAN
APPLICATION**

FIRST NATIONAL BANK IN CARLYLE
891 FAIRFAX STREET
CARLYLE, ILLINOIS 62231

Account Number _____
Census Tract _____

LOAN REQUEST

PURPOSE OF LOAN _____ AMOUNT REQUESTED _____ MONTHS NEEDED _____

PERSONAL INFORMATION

This application is designed to be completed by the applicant(s) with the lender's assistance. The Co-applicant section and all other Co-Applicant questions should be completed to the extent possible if: (1) co-applicant will be jointly obligated with you on the loan; (2) you will be relying on income or assets of the co-applicant as a basis for repayment of the loan; (3) you are relying on income from alimony, child support or separate maintenance from the co-applicant or other party; or (4) you are married to the co-applicant and reside in, or the property is located in, a community property State. If you are married, your spouse need not be jointly obligated with you on the loan and need not sign as a co-applicant unless item (2) above applies or unless the spouse's signature is required under state law to create a valid lien, pass clear title or waive inchoate rights to property.

APPLICANT				CO-APPLICANT			
FULL NAME		DATE OF BIRTH		FULL NAME		DATE OF BIRTH	
PRESENT ADDRESS - <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> YEARS		PHONE		PRESENT ADDRESS - <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> YEARS		PHONE	
PREVIOUS ADDRESS (complete if less than 2 years at present address)				PREVIOUS ADDRESS (complete if less than 2 years at present address)			
MARITAL STATUS <small>COMPLETE FOR SECURED LOANS ONLY</small>		DEPENDENTS		MARITAL STATUS <small>COMPLETE FOR SECURED LOANS ONLY</small>		DEPENDENTS	
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried - <small>(includes Single, Divorced or Widowed)</small>		Do Not Include Co-Applicant		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried - <small>(includes Single, Divorced or Widowed)</small>		Do Not Include Applicant or Dependents Listed by Applicant	
NO.		AGES		NO.		AGES	
SOCIAL SECURITY NO.				SOCIAL SECURITY NO.			
NAME AND ADDRESS OF EMPLOYER - How Long				NAME AND ADDRESS OF EMPLOYER - How Long			
Phone				Phone			
Type of Business		Position/Title		Type of Business		Position/Title	
PREVIOUS EMPLOYER - How Long		<small>(Complete if current job held less than two years)</small>		PREVIOUS EMPLOYER - How Long		<small>(Complete if current job held less than two years)</small>	
Type of Business		Position/Title		Type of Business		Position/Title	
Are there any unsatisfied judgements against you?		Yes <input type="checkbox"/> No <input type="checkbox"/>		Are there any unsatisfied judgements against you?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
In the last 7 years, have you been declared bankrupt?		Yes <input type="checkbox"/> No <input type="checkbox"/>		In the last 7 years, have you been declared bankrupt?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Did you ever have credit in any other name?		Yes <input type="checkbox"/> No <input type="checkbox"/>		Did you ever have credit in any other name?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, what name:				If Yes, what name:			

IF SELF EMPLOYED, PLEASE SUBMIT BALANCE SHEET, PROFIT AND LOSS STATEMENT, AND COPY OF LATEST FEDERAL TAX RETURN

ASSETS				INCOME			
DEPOSITS IN CHECKING & SAVINGS ACCOUNTS		AMOUNT OR VALUE		VERIFICATIONS REQUESTED <input checked="" type="checkbox"/>			
Name of Institution	Type	Account No.	Applicant	Co-Applicant	Monthly Income	Applicant	Co-Applicant
			<input type="checkbox"/>	<input type="checkbox"/>	Base Earnings <input type="checkbox"/> Gross <input type="checkbox"/> Net	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	Overtime	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	Bonuses - Commissions	<input type="checkbox"/>	<input type="checkbox"/>
Net worth of Business Owner - Attach Current Financial Statement				<input type="checkbox"/>	Dividends - Interest	<input type="checkbox"/>	<input type="checkbox"/>
Vehicles - List Make		Year	Fully Paid	<input type="checkbox"/>	Other - Optional - See Remarks	<input type="checkbox"/>	<input type="checkbox"/>
1)			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Personal Property - Furniture, Art, Jewelry, etc.				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Stocks-Bonds-Name Number @ Value Ea. Pledged				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Real Estate Owned				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
TOTAL ASSETS \Rightarrow				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<small>Income Remarks - Note: Income from Alimony, Child Support or Maintenance Payments need not be disclosed if you do not wish to have it considered as a basis for repaying this obligation.</small>							

LIABILITIES - OBLIGATIONS - CREDIT REFERENCES

NOTE: LIST ALL PERSONAL, TRUST PARTNERSHIP, OR CORPORATE DEBTS. IF RECENTLY PAID OFF, LIST FOR CREDIT REFERENCE. INCLUDE DEBTS FOR 1ST AND 2ND LIEN LOANS (MORTGAGE OR TRUST DEED), AUTOS, APPLIANCES, FURNITURE, PERSONAL LOANS AND NOTES, CO-SIGNED NOTES, ALIMONY, SUPPORT PAYMENTS, AND CHARGE ACCOUNTS

PURPOSE	(A)-Applicant; (CA)-Co-Applicant; (JT)-Jointly	OFFICE USE VERIFICATION REQUESTED <input checked="" type="checkbox"/>	ACCOUNT NUMBER	MONTHLY PAYMENT	BALANCE OWED (Mark as <input checked="" type="checkbox"/> if paying off)
	OWED TO (NAME & ADDRESS)				<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
TOTAL LIABILITIES \Rightarrow					<input type="checkbox"/>

1) ATTACH ADDITIONAL LIST IF MORE SPACE IS NEEDED.
2) IF ANY OBLIGATION IS PAST DUE - ATTACH LETTER OF EXPLANATION.

ADDRESS OF RESIDENCE PROPERTY		MORTGAGE HOLDER		ADDRESS OF MORTGAGE HOLDER		ACCOUNT NUMBER
PRESENT VALUE	DATE PURCHASED	PURCHASE PRICE	BALANCE FINANCED	MONTHLY PAYMENT	PRESENT BALANCE	

INSURANCE DISCLOSURE FOR CREDIT APPLICATION

DO NOT SIGN THIS FORM UNTIL YOU CAREFULLY READ IT AND UNDERSTAND ITS CONTENT

Purpose.

You have submitted an application for a loan. In connection with your loan application, Lender may be soliciting, offering to sell, or will sell you an insurance product or annuity. Federal law requires Lender to provide you with the following disclosures.

Credit Disclosures.

- Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from Lender or any of its affiliates.
- Lender, as a condition of granting you a loan, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.

PERSONAL REFERENCES

NAME OF NEAREST RELATIVE NOT OR PERSONAL REFERENCE LIVING WITH YOU	RELATIONSHIP	ADDRESS	CITY	STATE	PHONE

AGREEMENT

The undersigned hereby declare and represent that they have read the foregoing Application, that all statements made therein are complete and true to their knowledge, that all financial and credit information of value to the consideration of this Loan Request has been given and that the statements are made and information given as an inducement to the Lender to grant the Loan for which this Application is made. The Applicant(s) authorize the Lender, or his Agent, to verify the information contained herein and to make such additional normal inquiries as reasonably may be related to or associated with this Application, from credit bureaus and from employers, creditors, and references listed on this Application, and agree that such information, along with this Application, shall remain the Lender's property.

The undersigned understand that the selection of a dealer or contractor is their responsibility and that this financial institution in no way guarantees equipment, materials or workmanship and that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, as applicable under the provisions of Title 18, United States Code, Section 1014.

Accepted:

Applicant _____ Date _____ Applicant _____ Date _____

Driver's License No. _____ Driver's License No. _____

We intend to apply for joint credit _____ (Applicant's Initials) _____ (Co-Applicant's Initials)

LENDER USE

DISBURSEMENT DETAILS

Loan Proceeds	\$ _____
Official Fees	\$ _____
Credit Life Ins. Premium	\$ _____
Credit Disability Ins. Premium	\$ _____
Other	\$ _____
Amount Financed	\$ _____
FINANCE CHARGE	\$ _____
Service Charge	\$ _____
Interest	\$ _____
Total of Payments	_____
ANNUAL PERCENTAGE RATE	_____ %

DESCRIPTION OF COLLATERAL

New Used Year _____ Make _____
 Model _____
 Serial Number _____
 Color _____ Body Style _____
 No. of Cylinders _____ License Plate # _____
 Sales Price \$ _____ Invoice \$ _____
 Down Payment \$ _____ Trade-In \$ _____
 Loan Requested \$ _____ % to Price _____
 Dealer Name: _____
 Address: _____
 Phone _____ Salesman: _____
 OTHER COLLATERAL: _____

If secured by collateral, has an insurance loss payable been requested? Yes No
 Is there a copy of the Insurance Policy in the file? Yes No

LOAN DISPOSITION

Loan Approved - Rejected - Amount \$ _____ -
 Special Conditions: _____
 Interest Rate: _____ % Simple Add-On Discount
 Term: _____ months - Payment \$ _____ - - 1st Due: _____
 Security: _____
 Customer Notified _____ Dealer Notified _____
 Approved by _____ Date _____

BUDGET ANALYSIS

① Total Monthly Income _____ \$ _____
 Total Housing Expense _____ \$ _____
 Payments on All Debts _____ \$ _____
 Payment for This Loan _____ \$ _____
 ② Total All Payments _____ \$ _____
 Debt to Income Ratio (Line 2 Divided by Line 1) _____ %
 Comments: _____