

Consumer Loan Application

CREDIT REQUESTED			COLLATERAL OFFERED						
Amount Requested	# of Payments	Preferred Payment Day	<input type="checkbox"/> Real Estate	<input type="checkbox"/> Deposit Account / Investments	<input type="checkbox"/> Titled / Vehicle	<input type="checkbox"/> Other	<input type="checkbox"/> Unsecured		
Description of Collateral Offered									
Purpose of Credit Request									
Loan Type (i.e. Installment, Credit Line)				Credit Requested: <input type="checkbox"/> HELOC <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Home Improvement Loan					
APPLICANT				COAPPLICANT					
If the applicant is married, he or she may apply for individual credit.									
Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer				Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer					
Name				Name					
Date of Birth		Social Security Number		Date of Birth		Social Security Number			
Driver's License Number		Expiration Date		Driver's License Number		Expiration Date			
Home Street Address			Years at Address		Home Street Address			Years at Address	
City, State, Zip			County		City, State, Zip			County	
Home Phone		Cell Phone		Home Phone		Cell Phone			
Email Address				Email Address					
Number of Dependents		Ages of Dependents		Number of Dependents		Ages of Dependents			
Previous Address (if current less than 2 years)			Years at Address		Previous Address (if current less than 2 years)			Years at Address	
City, State, Zip				City, State, Zip					
EMPLOYMENT INFORMATION - APPLICANT				EMPLOYMENT INFORMATION - CO-APPLICANT					
Business/Employer Name <input type="checkbox"/> Self Employed				Business/Employer Name <input type="checkbox"/> Self Employed					
Business/Employer Street Address				Business/Employer Street Address					
City, State, Zip				City, State, Zip					
Business Phone		Monthly Income		Business Phone		Monthly Income			
Position/Title		From To		Position/Title		From To			
Previous Business/Employer Name <input type="checkbox"/> Self Employed				Previous Business/Employer Name <input type="checkbox"/> Self Employed					
Business/Employer Street Address				Business/Employer Street Address					
City, State, Zip				City, State, Zip					
Business Phone		Monthly Income		Business Phone		Monthly Income			
Position/Title		From To		Position/Title		From To			

PERSONAL REFERENCES - APPLICANT		PERSONAL REFERENCES - CO-APPLICANT	
Name	Relationship	Name	Relationship
Address	Phone	Address	Phone
Name	Relationship	Name	Relationship
Address	Phone	Address	Phone
Name	Relationship	Name	Relationship
Address	Phone	Address	Phone

ABOUT YOUR EXISTING LOANS AND ACCOUNTS

<input type="checkbox"/> Rent home		<input type="checkbox"/> Own home in the following names:			
Monthly Payment / Rent	Purchase Price	Date Purchased	Present Value	Original Loan Amount	Current Loan Balance
Name and Address of Mortgage Holder or Landlord					
Name of My Financial Institution				Checking Account #	Savings Account #

OTHER INCOME (IF ANY) - Indicate monthly values. (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.)

Interest / Dividends	Rental Income	Other Income	Describe "Other Income" Source
----------------------	---------------	--------------	--------------------------------

ASSETS		LOANS OR OTHER OBLIGATIONS		
Category	Value	Category	Amount Owed	Monthly Payment
Cash/Deposits	\$			
Stocks or Bonds	\$			
Automobiles	\$	Auto Loans	\$	\$
Real Estate	\$	Real Estate Loans	\$	\$
Life Insurance (Face Value: \$)	\$	Life Insurance Loans	\$	\$
Retirement Funds	\$	Credit Card Debt	\$	\$
Other Assets	\$	Other Obligations	\$	\$
Total Assets	\$	Total Liabilities	\$	\$
		Net Worth	\$	

QUESTIONS

Applicant	Co-Applicant	Question	Explanation (Use additional sheet if necessary.)
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are there any outstanding judgements against you?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been declared bankrupt?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a party to a lawsuit?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you obligated on any loan resulting in judgement, foreclosure, or title transfer?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you delinquent, in default on any Federal debt, financial obligation, bond, or loan guarantee?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you obligated to pay alimony, child support, or separate maintenance?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is any part of the down payment borrowed?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a co-maker or an endorser on a loan?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever had merchandise repossessed?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been denied credit with us?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a U.S. citizen?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, are you a resident alien?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, are you a non-resident alien?	

APPLICANT SIGNATURES

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit, or loan.

We intend to apply for joint credit: _____ (initial) _____ (initial)
 Applicant Co-Applicant

APPLICANT:

X _____ X _____
 Applicant Date Co-Applicant Date

TO BE COMPLETED BY INTERVIEWER

Application Taken By: Face to Face Interview Mail Telephone Internet

Interviewer	Interviewer's Phone	Interviewer's Employer Name/Address FIRST FEDERAL SAVINGS & LOAN ASSOCIATION OF CENTRAL ILLINOIS
-------------	---------------------	---

App #	Branch	Product	Market Survey
-------	--------	---------	---------------

Mortgage Loan Originator Unique Identifier, if applicable:	Mortgage Loan Origination Company Identifier, if applicable:
--	--