

64 S. Washington  
Oxford, MI 48371 (248) 969-7222

Check  
Appropriate  
Box

- If you are applying for an **individual** account in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete Sections **A** and **D**.
- If you are applying for a **joint** account that you and another person will use, complete **all** Sections, providing information in **B** about the joint applicant or user.

We intend to apply for joint credit: \_\_\_\_\_  
Applicant Co-Applicant

- If you are applying for an **individual** account, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections to the extent possible, providing information in **B** about the person on whose alimony, support, or maintenance payments or income or assets you are relying.

Amount requested \$ \_\_\_\_\_ Term \_\_\_\_\_ Mos. Loan purpose \_\_\_\_\_

**SECTION A: INFORMATION REGARDING APPLICANT** (use separate sheets if necessary)

Name (Last, First, Middle) \_\_\_\_\_

Birth date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of Birth \_\_\_\_\_

Current Street Address \_\_\_\_\_ Years there \_\_\_\_\_ No. Dependents \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Previous Address \_\_\_\_\_ Years there \_\_\_\_\_

Social Security No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_ Expires \_\_\_\_\_

Present Employer \_\_\_\_\_ Years there \_\_\_\_\_ Phone No. \_\_\_\_\_

Position/Title \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

Employer's Address \_\_\_\_\_

Previous Employer \_\_\_\_\_ Years there \_\_\_\_\_

Present Gross Salary/Commission \$ \_\_\_\_\_ per  Week  Month  Year Other Income \$ \_\_\_\_\_

Source of other income \_\_\_\_\_ (Alimony, child support, or separate maintenance need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)

Checking Account No. \_\_\_\_\_ Savings Account No. \_\_\_\_\_ Institution \_\_\_\_\_

Name of nearest relative not living with you \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

**SECTION B: INFORMATION REGARDING JOINT APPLICANT** (use separate sheets if necessary)

Name (Last, First, Middle) \_\_\_\_\_

Birth date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of Birth \_\_\_\_\_

Current Street Address \_\_\_\_\_ Years there \_\_\_\_\_ No. Dependents \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Previous Address \_\_\_\_\_ Years there \_\_\_\_\_

Social Security No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_ Expires \_\_\_\_\_

Present Employer \_\_\_\_\_ Years there \_\_\_\_\_ Phone No. \_\_\_\_\_

Position/Title \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

Employer's Address \_\_\_\_\_

Previous Employer \_\_\_\_\_ Years there \_\_\_\_\_

Present Gross Salary/Commission \$ \_\_\_\_\_ per  Week  Month  Year Other Income \$ \_\_\_\_\_

Source of other income \_\_\_\_\_ (Alimony, child support, or separate maintenance need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)

Checking Account No. \_\_\_\_\_ Savings Account No. \_\_\_\_\_ Institution \_\_\_\_\_

Name of nearest relative not living with you \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

**SECTION C: MARITAL STATUS** (Complete only if this is a joint application)

Applicant:  Married  Separated  Unmarried (including single, divorced, widowed)  
Co-applicant:  Married  Separated  Unmarried (including single, divorced, widowed)

**SECTION D: OUTSTANDING DEBTS**

Creditor (✓) If being paid off by loan proceeds	Type of Debt or Acct. No.	Original Amount	Current Balance	Monthly Payment
Landlord or Mortgage Holder:	<input type="checkbox"/> Buying/Own <input type="checkbox"/> Rent/Lease	\$	\$	\$

Are you a co-maker, endorser, or guarantor on any loan or contract?  Yes  No If "yes" for whom? \_\_\_\_\_ To whom? \_\_\_\_\_

Other obligations (example: liability to pay alimony, child support, separate maintenance); use separate sheet if necessary: \_\_\_\_\_

**SECTION E: SECURED CREDIT**  Vehicle  Boat  Motor Home  Other \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ VIN/Ser. No. \_\_\_\_\_

Prior Lien:  No  Yes If "yes" with whom? \_\_\_\_\_

Purchase Price \$ \_\_\_\_\_ Down Payment \$ \_\_\_\_\_ Seller/Dealer \_\_\_\_\_

The undersigned affirms that the information furnished to the Bank in connection with this transaction is true and correct. The undersigned hereby authorizes the Bank to obtain such information as may be required relative to this transaction within the framework of the Fair Credit Reporting Act and the Equal Credit Opportunity Act and here agrees that any document, including this application, and all information gathered shall remain the property of the Bank, whether or not the loan is approved.

X \_\_\_\_\_ Date \_\_\_\_\_ X \_\_\_\_\_ Date \_\_\_\_\_  
Applicant's Signature Co-Applicant's Signature (If applicable)

**BANK USE ONLY:**

Amount \$ \_\_\_\_\_ Term \_\_\_\_\_ Mos. Rate \_\_\_\_\_ %  Auto-Deduct Payment Pmt. Protection:  Yes  No

Collateral \_\_\_\_\_  Lien placed \_\_\_\_\_

Approved Conditions, Disbursements, \_\_\_\_\_  
& Comments \_\_\_\_\_

Decision by: \_\_\_\_\_ Officer # \_\_\_\_\_

Customer ID: Type: \_\_\_\_\_ ID No. \_\_\_\_\_ State Issued: \_\_\_\_\_ Expires: \_\_\_\_\_