



51 West Pearl Street,
 P.O. Box 309
 Coldwater MI 49036
 (517) 279-5500
 (800) 379-7628

Date: _____		Requested Loan Amount: \$ _____	
Purpose of Loan: _____			
What Type of Account are you applying for?			
<input type="checkbox"/> Individual (Own income / assets) (Own Income / Assets)		<input type="checkbox"/> Joint (please initial) _____ (Own Income / Assets plus income or assets from other sources)	
Collateral Offered: _____			
<u>Borrower Information</u>		<u>Co- Borrower Information</u>	
Name: _____		Name: _____	
SS#: _____		SS#: _____	
D/L or ID Number: _____		D/L or ID Number: _____	
D/L or ID Expiration Date: _____		D/L or ID Number Expiration Date: _____	
Birthday: / / Unmarried/Married/Separated:		Birthday: / / Unmarried/Married/Separated:	
Rent/Mortgage Payment: _____ Includes Taxes/Insur.?		Rent/Mortgage Payment: _____ Includes Taxes/Insur.?	
Address: _____		Address: _____	
Own/Rent? How long at address: Yrs. Mths		Own/Rent? How long at address: Yrs. Mths	
Phone: Home/Cell:		Phone: Home/Cell:	
Phone: Home/Cell:		Phone: Home/Cell:	
Email: _____		Email: _____	
<u>Previous Address (if less than 2 years in current)</u>		<u>Previous Address (if less than 2 years in current)</u>	
From: / / To: / /		From: / / To: / /	
Address: _____		Address: _____	
Own/Rent? How long at address: Yrs. Mths		Own/Rent? How long at address: Yrs. Mths	
Phone: Home/Cell:		Phone: Home/Cell:	
Phone: Home/Cell:		Phone: Home/Cell:	
Email: _____		Email: _____	
<u>Nearest Relative / Friend Not Living With You</u>		<u>Nearest Relative / Friend Not Living With You</u>	
Name: _____		Name: _____	
Address: _____		Address: _____	
Phone: _____		Phone: _____	



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Employment - Borrower

Employment - Co Borrower

Current Employer Name and Address:

Current Employer Name and Address:

Job Title:

Job Title:

Phone: How Long: Yrs./Mths.

Phone: How Long: Yrs./Mths.

Yrs. Experience: Income per Hour/Yr.:

Yrs. Experience: Income per Hour/Yr.:

If employed in current position for less than two years or currently employed in more than one position, complete the following:

If employed in current position for less than two years or currently employed in more than one position, complete the following:

Current Employer Name and Address:

Current Employer Name and Address:

Job Title:

Job Title:

Phone: How Long: Yrs./Mths.

Phone: How Long: Yrs./Mths.

Yrs. Experience: Income per Hour/Yr.:

Yrs. Experience: Income per Hour/Yr.:

Present Debts: (Car Payments, Credit Card, Loans, etc.)

Bank/ Co.:	Mo. Pmt:	Balance:	<i>Please Circle:</i>	Joint	Borrower	Co-Borrower

Real Estate I(We) Own:

Address:

Owner(s):

Cost:

Value:

Mortgage: (Bank/Co)

Monthly Payment - include taxes/Insurance:

Balance Owed:

Address:

Owner(s):

Cost:

Value:

Mortgage: (Bank/Co)

Monthly Payment - include taxes/Insurance:

Balance Owed:



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Real Estate I(We) Own - Cont.:

Address:	Address:
_____	_____
Owner(s):	Owner(s):
_____	_____
Cost:	Cost:
_____	_____
Value:	Value:
_____	_____
Mortgage: (Bank/Co)	Mortgage: (Bank/Co)
_____	_____
Monthly Payment - include taxes/Insurance:	Monthly Payment - include taxes/Insurance:
_____	_____
Balance Owed:	Balance Owed:
_____	_____

Borrower Assets

Co- Borrower Assets

Bank Account(s)

Bank Name:	Bank Name:
_____	_____
Ck/Svgs/CD/ IRS/	Ck/Svgs/CD/ IRS/
_____	_____
Balance:	Balance:
_____	_____
Bank Name:	Bank Name:
_____	_____
Ck/Svgs/CD/ IRS/	Ck/Svgs/CD/ IRS/
_____	_____
Balance:	Balance:
_____	_____
Bank Name:	Bank Name:
_____	_____
Ck/Svgs/CD/ IRS/	Ck/Svgs/CD/ IRS/
_____	_____
Balance:	Balance:
_____	_____
401K Bal: 401K Loan: Yes/No	401K Bal: 401K Loan: Yes/No

Vehicle(s)

Yr.: Mk/Model:	Yr.: Mk/Model:
_____	_____
Value:	Value:
_____	_____
Owner(s):	Owner(s):
_____	_____

Other Assets

Other Assets

Type of Asset:	Type of Asset:
_____	_____
Value of Asset:	Value of Asset:
_____	_____
Owner(s):	Owner(s):
_____	_____
Type of Asset:	Type of Asset:
_____	_____
Value of Asset:	Value of Asset:
_____	_____
Owner(s):	Owner(s):
_____	_____

Credit Protection:

No Insurance: Yes No Please Circle	Single Life and Single Disability: Yes No Please Circle
Single Life Insurance: Yes No Please Circle	Joint Life and Single Disability: Yes No Please Circle
Joint Life Insurance: Yes No Please Circle	

I (WE) CERTIFY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE. THAT IT IS MADE FOR THE PURPOSE STATED AND THAT I(WE) HAVE NO OTHER DEBTS THAN LISTED ABOVE. I (WE) AUTHORIZE YOU TO INVESTIGATE AND VERIFY MY (OUR) CREDIT HISTORY AND ANY INFORMAITON GIVE TO THE BANK BY ME (US.)

Borrower	Date	Co-Borrower	Date
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Application Completed: Phone Email
 In-peson Mail
 Video Other: