

LIST ALL DEBTS

Include bank, finance company, credit card, store charge and personal debts, also alimony, support payments and other mortgage loans. Attach additional sheet if necessary. If none, state "None."

NAME AND ADDRESS OF CREDITOR	IN WHAT NAME	ACCT. NUMBERS	UNPAID BALANCE	MONTHLY PAYMENT
1			\$	\$ 1
2			\$	\$ 2
3			\$	\$ 3
4			\$	\$ 4
5			\$	\$ 5
6			\$	\$ 6
AUTOMOBILE (LOANS OR LEASE)		BEING FINANCED THROUGH	\$	\$
			\$	\$
			\$	\$
PLEASE INDICATE WHICH OF THE ABOVE DEBTS, IF ANY, WILL BE PAID IN FULL WITH THIS LOAN.				

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

TO BE COMPLETED IF THE PROCEEDS OF THE LOAN ARE TO BE UTILIZED FOR A HOME PURCHASE, HOME IMPROVEMENT OR TO REFINANCE ANY LOAN THAT IS SECURED BY A DWELLING.

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for "Race". The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations the lender is required to note ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

PLEASE DO NOT COMPLETE THIS INFORMATION IF YOU ARE APPLYING FOR A HOME EQUITY CREDIT LINE.

APPLICANT: <input type="checkbox"/> I do not wish to furnish this information.			CO-APPLICANT: <input type="checkbox"/> I do not wish to furnish this information.		
Ethnicity:	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Not Hispanic or Latino	Ethnicity:	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Not Hispanic or Latino
Race:	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Asian	Race:	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Asian
	<input type="checkbox"/> Black or African American			<input type="checkbox"/> Black or African American	
	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> White		<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> White
Sex:	<input type="checkbox"/> Female	<input type="checkbox"/> Male	Sex:	<input type="checkbox"/> Female	<input type="checkbox"/> Male

Please read this statement before signing.

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history.

DATE OF APPLICATIO

MO	DAY	YEAR	1 _____	2 _____
			SIGNATURE OF APPLICANT	SIGNATURE OF JOINT APPLICANT, IF APPLICABLE

To be completed by interviewer.

THIS APPLICATION WAS TAKEN BY: _____ (DATE) _____ (INTERVIEWER)

- FACE-TO-FACE INTERVIEW
- MAIL
- TELEPHONE
- INTERNET