CONSUMER LOAN APPLICATION

Date application received

NMLS#

Welcome and thank you for choosing us for your financing needs.

Please completely fill out and return to one of our offices or mail directly to:



ATTN: Consumer Loan Dept. IMPORTANT: Read these directions before completing this Application. 234 West Northwest Highway Please check the box that applies (one box must be checked): Arlington Heights, Illinois 60004 I'm applying for a loan in my name only and will rely on my own income/assets to repay. 847-670-1000 We intend to apply together for this loan. Applicant Signature Co-Applicant Signature I'm applying for this loan in my name only but will rely on the income or assets of another person to repay. Type of credit you are looking for (one box must be checked): ☐ CD Secured □ Everyday Loan Requested Loan Amount \$_ Loan Purpose Number of Months IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required. APPLICANT CO-APPLICANT M.I. M.I. First Name Last Name First Name Last Name Home Address City State/Zip Home Address City State/Zip How long there? How long there? □ Own □ Rent □ Own □ Rent Name of Present Landlord/Mortgage Holder: Name of Present Landlord/Mortgage Holder: Prior Address (only if present address is less than 2 yrs.) Prior Address (only if present address is less than 2 yrs.) Primary Phone # Secondary Phone # Email Address Primary Phone # Secondary Phone # Email Address Social Security # Date of Birth Social Security # Date of Birth DO NOT COMPLETE IF THIS IS AN APPLICATION FOR INDIVIDUAL UNSECURED CREDIT. DO NOT COMPLETE IF THIS IS AN APPLICATION FOR INDIVIDUAL UNSECURED CREDIT. □ Married □ Separated □ Unmarried (including single, divorced, widowed) ☐ Married ☐ Separated ☐ Unmarried (including single, divorced, widowed) Are you a party to a civil union entered in IL or similar relationship in another state? ☐ Yes No ☐ Are you a party to a civil union entered in IL or similar relationship in another state? \Box Yes \Box No \Box U.S. Citizen: U.S. Citizen: □ No Permanent Resident Alien:

Yes ☐ Yes □ No Permanent Resident Alien:

Yes □ No Yes □ No Drivers License No. Date Issued State Issued State Expiration Drivers License No. Date Issued Expiration Other ID (State, Military, Tribal, etc.) State/Agency Date Issued Other ID (State, Military, Tribal, etc.) State/Agency Date Issued Expiration Expiration How Long There: Employer: How Long There: Employer: Address: Phone: Address: Phone: Type of Business: Occupation/Title: Type of Business: Occupation/Title: GROSS MONTHLY INCOME MONTHLY HOUSING EXPENSE Applicant Co-Applicant Total Rent (Monthly) Base Income First Mortgage (PITI**) Overtime Condo Assn Dues Bonuses Other (*) Total Monthly Payment Total Payments to alimony, child (*) Income from alimony, child support or separate maintenance need not be revealed if you do not wish to have it considered. support, or separate maintenance? (**) PITI=Principal, interest, taxes and insurance. Applicant and Co-applicant must answer the following questions: Applicant Co-Applicant Explanation and amount if any: \square Yes \square No □ Yes □ No 1. Are there any outstanding judgments against you? 2. Have you ever declared bankruptcy in the last 7 years? П Yes □ No П Yes □ No □ Yes □ No □ Yes □ No 3. Are you a guarantor, co-maker or endorser on another note? Agreement: I/We certify that everything stated in this application and on any attachments, is true and correct. You may keep the original or copy of this application whether or not the loan is granted. By signing below, I/We authorize you to verify information from any source named in the application and to answer questions others may ask you about my credit record with you. I/We fully understand 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 1B, United States Code, and Section 1014. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report. Applicant's Signature_ _ Date ____ Co-Applicant's Signature___ FOR INTERNAL USE ONLY

How application was received