



160 Main Street, Gloucester, MA 01930

Shaded areas for bank use only. Date Received:

CONSUMER LOAN APPLICATION

CREDIT REQUESTED A copy of your most recent paystub or Federal Tax Return must accompany this application. Date

Amount Requested Number of Payments Specific Purpose of Loan () Personal Loan () Auto or Other Loan () Individual () Joint Make: Model: Year: VIN: Purchase Price: Down Payment: Seller Insurance Broker's Name & Address: I would like to following insurance coverage: () Credit Life () Disability

COMPLETION INSTRUCTIONS FOR APPLICANT

Complete the Applicant information section for the first Applicant. Mark the appropriate box to indicate whether the Applicant is applying as a Cosigner, Guarantor, Grantor (of collateral). If the Applicant is married, he or she may apply for individual credit.

APPLICANT INFORMATION: Check if filing as: [] Cosigner [] Guarantor [] Grantor For whom:

Full Name: (First, Middle Initial, Last) Social Security Number Date of Birth Home Phone Number

Home Address: (Street, City, State, Zip Code) (If Rural, Show Road and Box Number) [] Own [] Rent Since

Complete Previous Address (Complete if less than 2 years at current address): (Street, City, State, Zip Code) If above was less than 2 years From To

Are you a U.S. Citizen? Permanent Resident? Have You Ever Filed Bankruptcy? Been Declared Bankrupt? Have You Ever Had Merchandise Repossessed? [] Yes [] No [] Yes [] No [] Yes [] No [] Yes [] No [] Yes [] No

Employer: (If Self-Employed, Name and Nature of Business) Since Occupation

Business Address Business Phone [] Monthly Gross [] Weekly Salary \$

Former Employer - Complete Name and Address (complete if employer above was less than two years) From To

Ages of Dependents Closest Relative Not Living With You: (Other Than Any Other Applicant) (Complete Name and Address) Relationship

CO-APPLICANT INFORMATION: Check if filing as: [] Cosigner [] Guarantor [] Grantor For whom:

Full Name: (First, Middle Initial, Last) Social Security Number Date of Birth Home Phone Number

Home Address: (Street, City, State, Zip Code.) (If Rural, Show Road and Box Number) [] Own [] Rent Since

Complete Previous Address: (Street, City, State, Zip Code) From To

Are you a U.S. Citizen? Permanent Resident? Have You Ever Filed Bankruptcy? Been Declared Bankrupt? Have You Ever Had Merchandise Repossessed? [] Yes [] No [] Yes [] No [] Yes [] No [] Yes [] No [] Yes [] No

Employer: (If Self-Employed, Name and Nature of Business) Since Occupation

Business Address Business Phone [] Monthly [] Weekly Salary \$

Former Employer - Complete Name and Address (complete if employer above was less than two years) From To

Ages of Dependents Closest Relative Not Living With You: (Other Than Any Other Applicant) (Complete Name and Address) Relationship

OTHER INCOME

APPLICANT

CO-APPLICANT

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.

Table with 4 columns: Source, Monthly Amount, Source, Monthly Amount. Includes checkboxes for court order, written agreement, oral understanding.

Is any income listed in this Section likely to be reduced in the next two years? [] YES (Explain in detail on a separate sheet) [] NO

ASSETS

TYPE	DESCRIPTION - Name of Bank / Credit Union	Value
Checking Accounts		
Savings Accounts		
Stocks and Bonds		
Real Estate		

LIABILITIES

TYPE	DESCRIPTION - Name of Bank / Credit Union	Credit Balance	Pmt./Month	Pmts. Left
Mortgage				
Rent				
Equity Line of Credit				
Credit Cards				
Alimony				
Other fixed monthly obligations				

BORROWER

Are you a co-maker, endorser or guarantor on any loan or contract other than listed above?

 Yes No

If "yes" for whom?

To Whom?

Are there any unsatisfied judgement against you?

 Yes No

Amount \$ If "yes" to whom owed?

CO-BORROWER

Are you a co-maker, endorser or guarantor on any loan or contract other than listed above?

 Yes No

If "yes" for whom?

To Whom?

Are there any unsatisfied judgements against you?

 Yes No

Amount \$ If "yes" to whom owed?

We intend to apply for joint credit.

Applicant's Initials

Co-Applicant's Initials

APPLICANT SIGNATURE(S)

The undersigned applicant(s) apply for the loan specified in this application and certify that the information submitted herein is true and complete. The undersigned authorize you to obtain information as you may require concerning the statements made in this application including credit reports and employment history and to provide information to others about Lender's credit experience with the undersigned. The Lender may retain this application whether or not it is approved.

Applicant

Date

Co-Applicant

Date

FOR BANK USE ONLY

Officer Name

Decision Date:

Loan No.

Decision and Comments: Approved Denied Incomplete Counteroffer Conditional Approval Withdrawal Other: _____

Notes: