

FIRST NATIONAL BANK, CORTEZ - CONSUMER LOAN APPLICATION

TYPE OF CREDIT REQUESTED

IMPORTANT: Check (3) the appropriate boxes below and complete the applicable sections.
 SECURED INDIVIDUAL CREDIT - relying solely on my income or assets
 UNSECURED JOINT CREDIT

IMPORTANT INFORMATION ABOUT PROCEDURES FOR 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 for 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.

AMOUNT REQUESTED \$	FOR HOW LONG	PAYMENT DATE REQUESTED	AUTO PAYMENT <input type="checkbox"/> Yes, to account # _____ <input type="checkbox"/> No, another financial institution # _____
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SECURED CREDIT Complete only if credit is to be secured. Briefly describe the property to be given as security:

COLLATERAL DESCRIPTION:

JOINT CREDIT: If you intend to apply for joint credit, please initial here _____

APPLICANT
 CO-APPLICANT
 GUARANTOR

NAME:			U.S. CITIZEN?			NAME:			U.S. CITIZEN?								
ADDRESS (STREET)			HOW LONG?			ADDRESS (STREET)			HOW LONG?								
CITY			STATE			CITY			STATE								
PREVIOUS ADDRESS (STREET)			ZIP			PREVIOUS ADDRESS (STREET)			ZIP								
CITY			STATE			CITY			STATE								
YEARS AT CURRENT ADDRESS: <input type="checkbox"/> OWN <input type="checkbox"/> RENT			HOME PHONE ()			DATE OF BIRTH			YEARS AT CURRENT ADDRESS: <input type="checkbox"/> OWN <input type="checkbox"/> RENT			HOME PHONE ()			DATE OF BIRTH		
SOCIAL SECURITY NO.			DRIVERS LICENSE NO. & STATE			SOCIAL SECURITY NO.			DRIVERS LICENSE NO. & STATE								
HAVE YOU EVER FILED BANKRUPTCY OR HAVE ANY LEGAL PROCEEDINGS <input type="checkbox"/> YES <input type="checkbox"/> NO						HAVE YOU EVER FILED BANKRUPTCY OR HAVE ANY LEGAL PROCEEDINGS <input type="checkbox"/> YES <input type="checkbox"/> NO											

APPLICANT'S EMPLOYMENT

CO-APPLICANT'S EMPLOYMENT

EMPLOYER			YEARS			EMPLOYER			YEARS		
POSITION			BUS. PHONE NO.			POSITION			BUS. PHONE NO.		
PREVIOUS EMPLOYER			YEARS			PREVIOUS EMPLOYER			YEARS		
POSITION			BUS. PHONE NO.			POSITION			BUS. PHONE NO.		

APPLICANT'S INCOME

CO-APPLICANT'S INCOME

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							
GROSS MONTHLY SALARY		AMOUNT OF OTHER MONTHLY INCOME		GROSS MONTHLY SALARY		AMOUNT OF OTHER MONTHLY INCOME	
SOURCE(S) OF OTHER MONTHLY INCOME				SOURCE(S) OF OTHER MONTHLY INCOME			

ARE YOU THE CO-MAKER, ENDORSER OR GUARANTOR ON ANY LOAN OR CONTRACT NO YES, FOR WHOM?

APPLICANT'S & CO-APPLICANT'S ASSETS

DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT?	VALUE
CHECKING ACCOUNT NUMBER(S) (where)			
SAVINGS ACCOUNT NUMBER(S) (where)			
CERTIFICATE OF DEPOSIT(S) (where)			
MARKETABLE SECURITIES (issuer, type, no. of)			
REAL ESTATE shares)			
AUTOMOBILES (location, date acquired)			
OTHER (make, model, year)			

APPLICANT'S & CO-APPLICANT'S OUTSTANDING DEBTS

CREDITOR	MO. PAYMENT	BALANCE	ACCOUNT NUMBER	PURPOSE/COLLATERAL
LANDLORD OR MORTGAGE HOLDER <input type="checkbox"/> RENT PAYMENT <input type="checkbox"/> MORTGAGE				
AUTO LOANS: <input type="checkbox"/> LOAN <input type="checkbox"/> LEASE				

The undersigned hereby declare and represent that they have read the foregoing Application, that all statements made therein are complete and true to their knowledge, that all financial and credit information of value to the consideration of this Loan Request has been given and that the statements are made and information given as an inducement to the Lender to grant the Loan for which this Application is made. The Applicant(s) authorize the Lender, or his Agent, to verify the information contained herein and to make such additional normal inquiries as reasonably may be related to or associated with this Application, from credit bureaus and from employers, creditors, and references listed on this application, and agree that such information, along with this Application, shall remain the property of the Bank.

X _____
X _____

Applicant's signature Date Co-Applicant/Guarantor signature Date

Grayco, Div of AccuSource (1/11)

CUSTOMER COPY - PLEASE RETAIN FOR YOUR RECORDS

CREDIT DISCLOSURES: An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is **not** a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is **not insured** by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an **investment risk**, there is **investment risk** associated with the insurance product, including the **possible loss of value**. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.