

CONSUMER LOAN APPLICATION

IMPORTANT: PLEASE READ THESE DIRECTIONS BEFORE COMPLETING THE APPLICATION AND CHECK THE APPROPRIATE BOX IN THIS SECTION, FOR HOW YOU ARE APPLYING

- If you are applying for **individual credit** in your own name and are relying on your income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete **Sections A, C and D, omitting B** and the Other Party in **Section C**.
- If this is an application for **joint credit** with another person, complete **all Sections**, providing information in **Section B** about the joint applicant. If you **intend to apply for joint credit**, please **initial here**: (Applicant) _____, (Co-Applicant) _____.
- If you are applying for individual credit, but are **relying on** income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections to the extent possible. Provide information in **Section B** about the person on whose alimony, support, maintenance payments or income, or assets you will rely on for repayment.

TYPE OF CREDIT REQUESTED: _____
 ___Unsecured; ___Secured; Collateral Offered: _____
 Amount Requested: \$ _____ Purpose: _____
 How Long: _____ Payment Date Desired: _____
 SWSB Account Used for Automatic Debit: _____

SECTION A - INFORMATION REGARDING APPLICANT:

Name (First/Middle Initial/Last): _____
 Present Address: _____ City: _____ St: _____ Zip _____
 Years There: _____ Birthdate: ____/____/____ Home Tel No: _____
 SSN: _____ DL#: _____ State Issued: _____ Expiration Date: _____
 Previous Address: _____ City: _____ St: _____ Zip: _____
 Years There: _____ Present Employer: _____ Years There: _____
 Phone No: _____ Address: _____ City: _____ St: _____ Zip: _____
 Position or Title: _____ Present **Gross** Salary or Commission: \$ _____ Per: _____
 Number of Dependents: _____ Ages: _____ Previous Employer: _____
 Years There: _____ Name of Nearest Relative Not Living With You: _____
 Relationship: _____ Address: _____ Telephone No: _____
*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.
 Alimony, child support, separate maintenance received under: ___written agreement or ___oral understanding.*

Sources of Other Income: _____ Amount per month: \$ _____

SECTION B - JOINT APPLICANT OR OTHER PARTY INFORMATION (Complete only if for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in community property state.)

Name (First/Middle Initial/Last): _____
 Present Address: _____ City: _____ St: _____ Zip: _____
 Years There: _____ Birthdate: ____/____/____ Home Tel No: _____
 SSN: _____ DL # _____ State Issued: _____ Expiration Date: _____
 Relationship to Applicant (if any) _____ Present Employer: _____
 Position or Title: _____ Years There: _____ Telephone No.: _____
 Present **Gross** Salary or Commission: \$ _____ Per: _____ No of Dependents: _____ Ages: _____
 Name of Nearest Relative Not Living With You: _____ Relationship: _____
 Address: _____ Telephone No. _____
*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.
 Alimony, child support, separate maintenance received under: ___written agreement or ___oral understanding.*

Sources of Other Income: _____ Amount per month: \$ _____

