



Peoples Exchange Bank

Consumer Loan Application

IMPORTANT: Read These Directions Before Completing This Application.

Please Check the Appropriate Box:

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income of another person as the basis for repayment of the credit requested, complete only the Applicant Section and the Financial Statement Section.

- If you are applying for joint credit with another person, complete all sections, providing information in the Co-Applicant Section about the joint applicant.
We intend to apply for joint credit.

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 fullest extent possible, providing information in the second section about the person on whose alimony, child support, maintenance payments, income or assets you are relying.

LOAN REQUEST

SECURED THIS IS AN INDIVIDUAL APPLICATION
 UNSECURED THIS IS A JOINT APPLICATION

Amount Requested \$ _____ Date: _____

| | | | | | |
|--|--|-------------------------|-------------------|---|--|
| APPLICANT <small>Please Read</small> | NAME (First) (Middle) (Last) | Date of Birth | Soc. Sec. No. | Home Phone No. | |
| Present Street Address | | City | | State | Zip Code |
| No. yrs. At Present Address | Mortgage Holder/ Landlord | Pmt./Rent | Purchase Price | Market Value | Mortgage Balance |
| Previous Address | | City | | State | Number of Yrs. At that Address |
| Present Employer | | No. Of Yrs. | Business Address | | Business Phone No. |
| Occupation of Position | | Gross Monthly Income | Previous Employer | Previous Employer's Address | |
| | | | | No. of Yrs. | |
| Note: 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. | | | | | |
| OTHER INCOME monthly \$ | | SOURCE OF OTHER INCOME: | | Bank Accounts <input type="checkbox"/> Checking <input type="checkbox"/> Savings | |
| Name of nearest relative not living with you | | Relatives Address | | City | State Phone No. Relationship |

| | | | | | |
|--|--|------------------------|-------------------|--|--|
| CO-APPLICANT <small>Only if Joint Acct.</small> | NAME (First) (Middle) (Last) | Date of Birth | Soc. Sec. No. | Home Phone No. | |
| Present Street Address | | City | | State | Zip Code |
| Present Employer | | No. of Yrs. | Business Address | | Business Phone No. |
| Occupation or Position | | Gross Monthly Income | Previous Employer | Previous Employer's Address | |
| | | | | No. Of Yrs. | |
| Note: 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. | | | | | |
| OTHER INCOME monthly \$ | | SOURCE OF OTHER INCOME | | Bank Account <input type="checkbox"/> Checking <input type="checkbox"/> Savings | |
| Name of the nearest relative not living with you | | Relatives Address | | City | State Phone No. Relationship |

| | |
|-------------------------|--|
| DEBT INFORMATION | IF APPLYING FOR A JOINT ACCOUNT PROVIDE INFORMATION ABOUT BOTH THE APPLICANT AND CO-APPLICANT IF APPLYING FOR AN INDIVIDUAL ACCOUNT PROVIDE INFORMATION ON APPLICANT ONLY. USE SEPARATE SHEET IF NECESSARY. LIST ALL DEBTS NOW OWING; INCLUDE BANKS, FINANCE COMPANIES, AUTO LOANS AND CREDIT CARDS-ALSO LIST ACCOUNTS PAID OUT IN LAST TWO YEARS. |
|-------------------------|--|

| NAME OF CREDITOR | ADDRESS OF CREDITOR | ACCOUNT CARRIED IN NAME(S) OF | DATE OPENED | ACCOUNT NUMBER | MONTHLY PAYMENT | BALANCE |
|------------------|---------------------|-------------------------------|-------------|----------------|-----------------|---------|
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| FINANCIAL STATEMENT | <input type="checkbox"/> Applicant Only | <input type="checkbox"/> Joint | Financial Statement Date: _____ |
|----------------------------|---|--------------------------------|---------------------------------|

| ASSETS: | Where Held | Amount | DEBTS: | Owed To | Mo. Pmt. | Amount |
|---------------------------|-------------------|---------------|--------------------------------|----------------|-----------------|---------------|
| Checking _____ | | , \$ _____ | Accounts Owed _____ | | \$ _____ | \$ _____ |
| Savings _____ | | , \$ _____ | Accounts Owed _____ | | \$ _____ | \$ _____ |
| Notes Rec. _____ | | , \$ _____ | Other _____ | | \$ _____ | \$ _____ |
| Other _____ | | , \$ _____ | Other _____ | | \$ _____ | \$ _____ |
| Auto: Make _____ Yr _____ | | , \$ _____ | Auto Loan _____ | | \$ _____ | \$ _____ |
| Auto: Make _____ Yr _____ | | , \$ _____ | Auto Loan _____ | | \$ _____ | \$ _____ |
| Real Estate: Cost _____ | | , \$ _____ | Mortgage _____ | | \$ _____ | \$ _____ |
| _____ | | | Mortgage _____ | | \$ _____ | \$ _____ |
| Personal: _____ | | , \$ _____ | Other Debts _____ | | \$ _____ | \$ _____ |
| Other _____ | | , \$ _____ | Total Debts _____ | | \$ _____ | \$ _____ |
| Total Assets: | | \$ _____ | Net Worth _____ | | | \$ _____ |
| | | | Total Debt and Net Worth _____ | | | \$ _____ |

| | | |
|--|---|--|
| Are you required to Pay Alimony/Child Support? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how much? _____ | Have you ever Filed Bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, when? _____ | Do you have any Judgements? <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|---|--|

| | |
|--|---|
| APPLICANT'S SIGNATURE _____ DATE _____ | CO-APPLICANT'S SIGNATURE _____ DATE _____ |
|--|---|

*******FOR BANK USE ONLY*******

| Purpose: _____ _____ Collateral: _____ _____ _____ | FEES VEHICLE INSP. FEE LOAN ORIGATION LIEN RECORDING VSI LIFE INSURANCE (J/S) A & H INS. (Y/N) INTEREST RATE (%) IF VARIABLE, INDEX & MARGIN DEBT/INCOME CREDIT SCORE | _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ | CLOSING DATE DATE/TIME FOR RENEWAL OFFICER # BRANCH NEW LOAN (Y/N) RENEWAL (Y/N) REFINANCE (Y/N) LOAN GRADE | _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ | | | | | | | | |
|--|---|---|---|---|--|--|--|--|---|--------------------------|--------------------|---------------------------|
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">TERM</th> <th style="width: 20%;">PMT FREQUENCY</th> <th style="width: 20%;">FIRST PMT DUE</th> <th style="width: 45%;">AMOUNT</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> | TERM | PMT FREQUENCY | FIRST PMT DUE | AMOUNT | | | | | KY Insurance Disclosure: Yes or No Home Improvement: Yes or No | Approving Officer: _____ | Declined By: _____ | Consenting Officer: _____ |
| TERM | PMT FREQUENCY | FIRST PMT DUE | AMOUNT | | | | | | | | | |
| | | | | | | | | | | | | |

DUE US AT PRESENT

| Loans | Number | Direct Amount | Indirect Amount |
|--|--------|---------------|-----------------|
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| Total PEB Exposure Including this Note \$ _____ | | | |