

FINANCIAL STATEMENT AND APPLICATION – SECTION I

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Number of years at this address: _____ Phone Number _____ Cell _____

Previous address If less than 3 years at current address:

Address: _____
 City: _____ State: _____ Zip: _____
 Social Security # and Tax I.D if self-employed: _____
 Employer: _____
 Employer Address: _____
 City: _____ State: _____ Zip: _____

Position or occupation: _____

Salary (include bonus and or commission) \$ _____
 Dividends \$ _____
 Rental Income \$ _____
 Other(Specify) \$ _____
 Total \$ _____
 Total last year income \$ _____

Are you obligated to pay alimony or child support? YES NO If yes how much: \$ _____

Income tax settled through: _____

Have you ever declared bankruptcy? YES NO

Are you a defendant in any legal actions? YES NO

Assets

Bank Accounts \$ _____
 Government and marketable securities \$ _____
 Privately owned companies \$ _____
 Partial interest in real estate \$ _____
 Real estate owned \$ _____
 Cash surrender value of life insurance \$ _____
 Personal Property \$ _____
 Other Assets – List _____

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

Total Assets \$ _____

Liabilities

Notes payable to banks and others \$ _____
 Mortgage(s) payable \$ _____
 Unpaid income tax \$ _____
 State \$ _____
 Federal \$ _____
 Credit card or charge accounts \$ _____
 Installment debt \$ _____
 Other Debt – List _____

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

Total Liabilities \$ _____

Total assets less total liabilities \$ _____

Do you have any contingent liabilities or are you a co-maker on any loans? YES NO
 If yes, explain _____



FINANCIAL STATEMENT AND APPLICATION – SECTION II

Real Estate Owned

Address	Title in Name of	Date Acquired	Cost	Mortgage Amount

(Add separate attachment for additional real estate holdings.)

Partial Interest in Real Estate

Address	Title in Name of	Date Acquired	Cost	Mortgage Amount

Government & Marketable Securities

# Of Shares	Description	In Name of	Market Value	Pledged Y/N

Life Insurance Owned

Insurance Co.	Owner of Policy	Face Amount	Policy Loans	Cash Surrender Value

Loans Open/Closed

Bank	Address	Telephone	High Credit	Balance	Monthly/Annual Payment Amount

The information provided by me in this statement is for the purpose of obtaining credit. The undersigned recognizes & understands that the credit grantor is relying in the information provided to determine an approval of credit for the request submitted. I / we represent that all the information provided is true and accurate to the best of my / our knowledge and you as a credit grantor may continue to rely on this until a written statement of change is provided. You or your banks are authorized to make all inquiries you deem necessary to verify the accuracy of the statement made herein and to determine my / our credit worthiness

Date: _____ Signature: _____ Date of Birth: _____

Signature: _____ Date of Birth: _____

