

HIGHLAND FEDERAL SAVINGS AND LOAN

CONSUMER LOAN APPLICATION

Important: Check the appropriate boxes below and complete ALL of the application sections.

<input type="checkbox"/> Secured	<input type="checkbox"/> Individual Credit -rely solely on my income or assets. Date _____	
<input type="checkbox"/> Unsecured	<input type="checkbox"/> Individual Credit - rely on my Income or assets as well as Income or assets from other sources.	
	<input type="checkbox"/> Joint Credit (initials) _____	

Purpose of Loan _____	Account No. _____	Interest Rate _____	Amount Requested _____	Months Needed _____
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PERSONAL INFORMATION

This application is designed to be completed by the applicant(s) with the lender's assistance.

The Co-Applicant section and all other Co-Applicant questions should be completed to the extent possible if: (co-applicant will be jointly obligated with you on the loan; (2) you will be relying on income or assets of the co-applicant as a basis for repayment of the loan; (3) you are relying on income from alimony, child support or separate maintenance from the co-applicant or other party; or (4) you are married to the co-applicant and reside in, or the property is located in, a community property State. If you are married, your spouse need not be jointly obligated with you on the loan and need not sign as a co-applicant unless item (2) above applies or unless the spouse's signature is required under state law to create a valid lien, pass clear title or waive inchoate rights to property.

Applicant				Co-Applicant			
Full Name		DOB	Age	Full Name		DOB	Age
Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent		Years	Phone	Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent		Years	Phone
Mailing Address		Cell #:		Mailing Address		Cell #:	
Previous Address-If less than 2 yrs at present address		Years		Previous address-If less than 2 yrs at present address		Years	
		<input type="checkbox"/> Own <input type="checkbox"/> Rent				<input type="checkbox"/> Own <input type="checkbox"/> Rent	
MARITAL STATUS		DEPENDENTS		MARITAL STATUS		DEPENDENTS	
Complete for Secured Loans Only <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, or widowed)		Do Not Include Co-Applicant		Complete for Secured Loans Only <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, or widowed)		Do Not Include Applicant or Dependents Listed by Applicant	
		No.	Ages			No.	Ages
Social Security No.				Social Security No.			
Name and Address of Employer		Years	Phone	Name and Address of Employer		Years	Phone
Type of Business		Position/Title		Type of Business		Position/Title	
Name and Address of		Complete if current job less than 2 yrs.		Name and Address of		Complete if current job less than 2 yrs.	
Type of Business		Position/Title		Type of Business		Position/Title	
Are there any unsatisfied judgements against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, to whom?				Are there any unsatisfied judgements against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, to whom?			
In the last 7 years, have you been declared bankrupt? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where?				In the last 7 years, have you been declared bankrupt? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where?			
Did you ever have credit in any other name? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what other name:				Did you ever have credit in any other name? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what other name:			
Are you a party to any lawsuits? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain.				Are you a party to any lawsuits? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain.			
Are you a co-maker or guarantor on any loan or contract? <input type="checkbox"/> Yes <input type="checkbox"/> No				Are you a co-maker or guarantor on any loan or contract? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you previously had credit with us? <input type="checkbox"/> Yes <input type="checkbox"/> No				Have you previously had credit with us? <input type="checkbox"/> Yes <input type="checkbox"/> No			

If self employed, please submit balance sheet, profit and loss statement and copy of latest federal tax return.

Assets				Income			
Deposits in Checking & Savings Accounts				Verifications Requested <input type="checkbox"/> <input type="checkbox"/>			
Name of Institution	Type	Account #	Amount or Value	Monthly Income		Applicant	Co-Applicant
			Applicant	Co-Applicant			
Net worth of business owned-attach a CURRENT financial statement				Base Earnings (Gross)			
Vehicles-Year/Make/Model Fully Paid				Overtime			
1) <input type="checkbox"/> Yes <input type="checkbox"/> No				Bonuses-Commissions			
2) <input type="checkbox"/> Yes <input type="checkbox"/> No				Dividends-Interest			
Personal Property-furniture, art, jewelry, etc.				Other-Optional-See remarks			
Stocks/Bonds No. Value Ea. Pledged				TOTAL INCOME ->			
				Income Remarks-Note: Income from Alimony, Child Support or Maintenance Payments need not be disclosed if you do not wish to have it considered as a basis for repaying this obligation.			
Real Estate Owned				Is any income listed likely to be reduced before loan is paid off? Explain.			
Other Asset							
TOTAL ASSETS ->							

Please complete back side of this application.

Liabilities-Obligations-Credit References

NOTE: LIST ALL PERSONAL, TRUST PARTNERSHIP, OR CORPORATE DEBTS. IF RECENTLY PAID OFF, LIST FOR CREDIT REFERENCE. INCLUDE DEBTS FOR FIRST AND SECOND LIEN LOANS (MORTGAGE OR TRUST DEED), AUTOS, APPLIANCES, FURNITURE, PERSONAL LOANS AND NOTES, CO-SIGNED NOTES, MEDICAL DEBT, ALIMONY, SUPPORT PAYMENTS, MONTHLY HOUSING EXPENSE (RENT AND INSURANCE), AND ALL CHARGE ACCOUNTS.

PURPOSE	(A)-Applicant, (CA)-Co-Applicant, (JT)-Jointly		Office Use If Verification Requested	ACCOUNT NUMBER	MONTHLY PAYMENT	BALANCE OWED	Pay Out of Loan
	OWED TO (Name & Address)						
<input type="checkbox"/> Rent Pmt.		Landlord or	<input type="checkbox"/>				<input type="checkbox"/>
<input type="checkbox"/> Mortgage Pmt.		Mortgage Holder	<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>				<input type="checkbox"/>
1) Attach additional list if more space is needed.				TOTAL ->			
2) If any obligation is past due, attach letter of explanation.				LIABILITIES			

Insurance

LIFE INSURANCE COMPANIES-NAMES & ADDRESSES	(A)-Applicant, (CA)-Co-Applicant, (JT)-Jointly		
	TYPE	FACE AMOUNT	CASH VALUE
AUTO INSURANCE CARRIER NAME & ADDRESS	TYPE	POLICY NO.	AGENT & TEL #
HOMEOWNERS INSURANCE NAME & ADDRESS			

Agreement

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 the 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 Lender's property.

The undersigned understand that the selection of a dealer or contractor is their responsibility and that this financial institution in no way guarantees equipment, materials or workmanship and that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1014.

JOINT CREDIT - We intend to apply for joint credit. (initials) _____

Accepted by:

Applicant _____ Date _____ Co-Applicant _____ Date _____

Driver's License No. _____ Driver's License No. _____

Information for Government Monitoring Purposes

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

BORROWER I do not wish to furnish this information. **CO-BORROWER** I do not wish to furnish this information.

Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American	Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

To be Completed by Interviewer This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet	Interviewer's Name (print or type)	Name and Address of Interviewer's Employer HIGHLAND FEDERAL SAVINGS AND LOAN 106 SOUTH MAIN STREET CROSSVILLE, TN 38555
	Interviewer's Signature _____ Date _____	
	Interviewer's Phone Number (incl. area code)	