



**Waverly Office**  
 609 Pacific Ave • Waverly  
 MN 55390  
 763-658-4417

**Mailing Address**  
 PO Box 68  
 Waverly MN 55390

**Montrose Office**  
 145 Nelson Blvd • Montrose  
 MN 55363  
 763-675-2265

bankwaverly.com • bankmontrose.com

## CONSUMER LOAN APPLICATION

**IMPORTANT APPLICANT INFORMATION** Federal law requires financial institutions to obtain information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill the requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

<b>TYPE OF CREDIT REQUESTED</b>				<b>FOR CREDITOR USE</b>	
IMPORTANT: Check (X) the appropriate boxes below and complete the appropriate sections.					
<input type="checkbox"/> SECURED	<input type="checkbox"/> INDIVIDUAL CREDIT - relying solely on my income or assets				
<input type="checkbox"/> UNSECURED	<input type="checkbox"/> INDIVIDUAL CREDIT - relying on my income or assets as well as income or assets from other sources				
<input type="checkbox"/> JOINT CREDIT - We intend to apply for joint credit (initial here) _____					
AMOUNT REQUESTED	FOR HOW LONG	PAYMENT DATE DESIRED	DESIRED REPAYMENT SCHEDULE	PROCEEDS OF LOAN TO BE USED FOR	
\$ _____			<input type="checkbox"/> MONTHLY <input type="checkbox"/> _____	_____	

### SECTION A – INDIVIDUAL APPLICATION INFORMATION

NAME (Last, First, Middle)					
BIRTHDATE	TELEPHONE	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS
ADDRESS (Street, City, State & Zip)					
PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than 3 years at present address)			COUNTY	Do you <input type="checkbox"/> Own <input type="checkbox"/> Rent	HOW LONG?
CURRENT EMPLOYER (Company Name & Address)					HOW LONG?
BUSINESS PHONE EXT.	POSITION OR TITLE		SALARY PER MONTH GROSS: \$ _____ NET: \$ _____		
PREVIOUS EMPLOYER (Company Name & Address)					HOW LONG?
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE NO. WITH AREA CODE	
<b>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.</b>					
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
OTHER SOURCES OF INCOME				AMOUNT PER MONTH \$ _____	
Is any income listed in this section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain) _____			Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes When? _____		

### 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 a community property state.

NAME (Last, First, Middle)					
BIRTHDATE	TELEPHONE	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS
ADDRESS (Street, City, State & Zip)					
PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than 3 years at present address)			COUNTY	Do you <input type="checkbox"/> Own <input type="checkbox"/> Rent	HOW LONG?
EMPLOYER (Company Name & Address)					HOW LONG?
BUSINESS PHONE EXT.	POSITION OR TITLE		SALARY PER MONTH GROSS: \$ _____ NET: \$ _____		
PREVIOUS EMPLOYER (Company Name & Address)					HOW LONG?
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU			RELATIONSHIP	TELEPHONE NO. WITH AREA CODE	
<b>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.</b>					
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
SOURCES OF INCOME				AMOUNT PER MONTH \$ _____	
Is any income listed in this section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain) _____			Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes When? _____		

## SECTION C – MARITAL STATUS

Complete for joint credit or secured credit, or if applicant resides in a community property state or if relying on property located in such a state and is a basis for repayment of the credit requested.

APPLICANT  Married  Separated  Unmarried (including single, divorced, widowed)  
 CO-APPLICANT  Married  Separated  Unmarried (including single, divorced, widowed)

## SECTION D – ASSET & DEBT INFORMATION

If Section B has been completed, the Section should be completed giving information about both the Applicant and Joint Applicant or Other Person.  
Please mark Applicant-related information with an "A" if Section B was not completed, only give information about the Applicant in this Section.

### ASSETS OWNED (Use separate sheet if necessary.)

DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT?	BALANCE/VALUE
CHECKING ACCOUNT NUMBER(S) (where)			
SAVINGS ACCOUNT NUMBER(S) (where)			
CERTIFICATE OF DEPOSIT(S) (where)			
MARKETABLE SECURITIES (issuer, type, no. of shares)			
REAL ESTATE (location, date acquired)			
LIFE INSURANCE (issuer, face value)			
AUTOMOBILES (make, model, year)			
OTHER (list)			
OTHER (list)			
<b>TOTAL ASSETS</b>			

### OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages and other obligations. Use separate sheet if necessary.)

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
LANDLORD OR MORTGAGE HOLDER)	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$ _____	\$ _____	\$ _____
AUTOMOBILES (describe)			\$ _____	\$ _____	\$ _____
			\$ _____	\$ _____	\$ _____
			\$ _____	\$ _____	\$ _____
			\$ _____	\$ _____	\$ _____
			\$ _____	\$ _____	\$ _____
			\$ _____	\$ _____	\$ _____
<b>TOTAL DEBTS</b>			\$ _____	\$ _____	\$ _____

Complete the following information about both the Applicant and Joint Applicant or Other Person (if applicable)

Are you obligated to make Alimony, Support or Maintenance Payments?  No  Yes

If yes, to (Name & Address) \_\_\_\_\_ Amt. per month \$ \_\_\_\_\_

Are you a co-maker, endorser, or guarantor on any loan or contract?  No  Yes If yes, for whom? \_\_\_\_\_ To whom \_\_\_\_\_

Are there any unsatisfied judgments against you?  No  Yes If yes, to whom owed? \_\_\_\_\_ Amount \$ \_\_\_\_\_

Have you been declared bankrupt in the past 10 years?  No  Yes If yes, where? \_\_\_\_\_ Year \_\_\_\_\_

## SECTION E – SECURED CREDIT

Complete only if credit is to be secured. Briefly describe the property to be given as security.

PROPERTY DESCRIPTION

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY

**SIGNATURES** I certify that everything I have stated in this application is correct. Lender may keep this application whether or not it is approved. By signing below I authorize Lender to check my credit and employment history and to answer questions others may ask Lender about my credit record with Lender. I understand that I must update credit information at Lender's request if my financial condition changes.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant (if applicable) \_\_\_\_\_ Date \_\_\_\_\_