

Credit Application



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INFORMATION REGARDING APPLICANT(S) - COBORROWER

Full Name				Birthdate	Home Phone
Email Address				Cell Phone	Business Phone
If US Person/Resident: <i>(Complete all that apply)</i>	Driver's License/State ID no	State	Date of Issuance	Date of Expiration	SSN/Tax ID Number
If Non-Person/Resident:	Passport No & Country of Issuance	Individual Taxpayer ID no	No Taxpayer ID Number but have filed application. Date Filed:	Government issued document no and country of issuance:	Other
Are you a member of the armed forces who is serving on active duty or on active Guard or Reserve duty?				Other (Military ID, Tribal ID, Etc.)	
Present physical residential or business address and mailing address. If military, APO or FPO address. If N/A, next of kin or friend address.					How long at Present Address?
Previous address (Street, City, State, & Zip)					How long at Previous Address?
Present Employer (Company Name & Address)		Occupation	Position or Title	How Long with Present Employer	Name of Supervisor
Previous Employer				How Long with Previous Employer	Name of Supervisor
Present Gross Salary or Commission \$ Per				Number of Dependents	Ages of Dependents
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, or separate maintenance received under:					
Other Income \$ Per		Sources of other income		Have you ever received credit from us?	
Is any income listed in this section likely to be reduced before the credit requested is paid off?		Checking Account Number: Bank where account exists:		Savings Account Number: Bank where account exists:	
Name & Address of Nearest Relative Not Living with You				Relationship	Telephone Number

MARITAL STATUS (DO NOT COMPLETE IF THIS IS AN APPLICATION FOR INDIVIDUAL UNSECURED CREDIT)

Applicant:	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (Including single, divorced, or widowed)
Other Party:	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (Including single, divorced, or widowed)

ASSETS OWNED (USE SEPARATE SHEET IF NECESSARY)

Description of Assets	Value	Subject to Debt	Name of Owners
Cash			
Automobiles (Make, Model, Year)			
1.			
2.			
Cash Value of Life Insurance (Issuer, Face Value)			
Real Estate (Location, Date Acquired)			
Marketable Securities (Issuer, Type, Number of Shares)			
Other (List)			
Total Assets			

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OUTSTANDING DEBTS (INCLUDE CHARGE ACCOUNTS, INSTALLMENT CONTRACTS, CREDIT CARDS, RENT, MORTGAGES, ETC.)

Creditor	Type of Debt or Account Number	Name in Which Account is Carried	Original Debt	Present Balance	Monthly Payments	Past Due?
Landlord or Mortgage Holder						
Other Debts						

Are you the co-maker, endorser, or guarantor on any loan or contract? To Whom?

Are there any unsatisfied judgements against you? To Whom Owed?

Have you been declared bankrupt in the last 10 years? If yes, Where? Where?

Other Obligations (For example, liability to pay alimony, child support, separate maintenance)

SECURED CREDIT

Property Description

Names & Addresses of all Co-owners of the Property

If the Security is Real Estate, Give the Full Name of Your Spouse (if applicable)

Credit Disclosures: an insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered, we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

SIGNATURES

Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and answer questions about your credit experience with me.	Unless I have purchased the insurance product(s) by mail or if the Credit Disclosures are provided electronically, by signing below, I acknowledge that I have received the Credit Disclosures orally at the time I have applied for credit and fully understand the disclosures noted above. I am also being provided with a copy of these disclosures and acknowledge receipt by my signature.
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Applicant's signature	Date	Other Signature (Where Applicable)	Date
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FEDERAL CONSUMER CREDIT DISCLOSURES

CREDIT DISCLOSURES: an insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered, we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

FOR OFFICE USE ONLY

INFORMATION PROVIDED BY	APPLICATION TAKEN BY	DATE	BRANCH LOCATION
In Person Internet Mail Telephone	Employee Code:		