CONSUMER LOAN APPLICATION (ORIGINATION VERSION)

| Credit Reques | sted Is: | Home Equity Loan | | Collateral Se | ecure | d Loan Perso | onal Unsecured Loa | n | | Account Requested: | Individu | ıal | Joint |
|---|--|--|---|--|--|--|---|--|--|---|---|---|--|
| | Amount Requested Description of Collateral Offered | | | | | | | | We intend to | | nt cre | dit | |
| Purpose of Credit Request | | | | | | | | | Applicant | Initial | - | Co-Applicant | |
| If the Applicar | nt is married, he | or she may apply for ind | ividual cr | edit. For N | 1arita | I Status, check one it | f a) you are applyin | g for a | a secured cred | lit; b) you reside in a commu | inity property | y state | 9; |
| or c) you are r | relying on prope | Applica | | as a pasis | | PPLICANT II | | ON | | Co-Applicant | | | |
| Applicant Role | e. | Borrower | Co-Sign | er | <u> </u> | rantor | Applicant Role: | | | orrower Co-Signer | , П _в | uarant | tor |
| | | r Sr. if applicable) | CO-Olgi | | Oue | iantoi | Co-Applicant Nar | ne (in | | | | uaram | ioi |
| Social Security Number Home Phone (incl. area code) DOB (mm-dd-yyyy) | | | | | Social Security Number Home Phone (incl. area code) DOB (mm-dd-yyyy) | | | | | | | | |
| Email Address | S | | | | | | Email Address | | | <u> </u> | | | |
| ☐ Married ☐ Dependents (not listed by Co-Applicant) | | | | | ☐ Married Dependents (not listed by Applicant) ☐ Unmarried (include | | | | | | | | |
| ☐ Separated ☐ single, divorced, widowed) no. ages | | | | | Separated single, divorced, widowed) no. ages | | | | | | | | |
| Citizenship: | U.S. Ciess (street, city, | | nce | Alien L | _ No | on-Resident Alien | Citizenship: U.S. Citizen Permanent Resident Alien Non-Resident Alien Present Address (street, city, state, ZIP) since | | | | | | |
| | | rom Present Address | | | | | Present Address (street, city, state, ZIP) since Mailing Address, if different from Present Address | | | | | | |
| | | | | | | | | | | | | | |
| Former Addre | ess (street, city, | state. ZIP) fr | om If | residing at | pres | ent address for less th | | | | | to | | |
| - Cimor riddro | (0.1001, 011), | | | | | | Former Address (street, city, state, ZIP) from to | | | | | | |
| | | Applica | ant | EMPL | -0, | MENT / INC | OME INFO | RM. | ATION | Co-Applicant | | | |
| Name & Address | s of Employer | | ☐ Self | Employed | | Yrs. on this job | Name & Address | of En | mployer | ☐ Self | f Employed | | Yrs. on this job |
| | | | | | | Full time | | | | | | | ☐ Full time |
| Position/Title & | Type of Busines | s | | Business I | Phone | e (incl. area code) | Position/Title & T | уре с | of Business | | Business F | hone | (incl. area code) |
| Gross Monthly I | ncome | \$ | _ | | | | Gross Monthly In | come | \$ | | | — | |
| Name & Address | s of Employer | | ☐ Self | Employed | | Dates | Name & Address of Employer | | | | Dates | | |
| | | | | | | from | | | | | | | from |
| Position/Title & | Type of Busines | s | | Business F | Phone | to e (incl. area code) | Position/Title & T | уре с | of Business | | Business F | hone | to (incl. area code) |
| Name & Address | s of Employer | | Self | Employed | | Dates | Name & Address of Employer Self Employed | | | Dates | | | |
| | <u>-</u> | | _ | | | from | | | .,, | | , | | from |
| Position/Title & | Type of Busines | s | | Business I | Phone | to e (incl. area code) | Position/Title & T | уре с | of Business | | Business F | hone | (incl. area code) |
| NOTICE: Alimor | ny, Child Suppor | t or Separate Maintenand | e Income | e need not l | ре ге | vealed if you do not v | vish to have it cons | sidere | d as a basis fo | r repaying this obligation. | | | |
| Other Income | | | | | \$ | - | Other Income | | | | | \$ | |
| Other Income | | | | | \$ | | Other Income | | | | | \$ | |
| | | | | | | | | | | | | | |
| Other Income | 1 7 | | | | Other Income \$ | | | | | | | | |
| Own D | Rent since | | | | | Monthly Housing/F | | A.S | Present Valu | 9 | Date Purc | hased | l |
| | | | | | C/ | SH ASSET | INFORMAT | ION | | | | | |
| Financial Institution Name | | | | | | | | Accou | unt Balance | | | | |
| APPLICA | ANT SIGN | ATURE(S) | | | | | | | | | | | |
| complete, and the with other parties as to Lender's e and responding me/us, and other representations, marketing comp | hat I/we did not es and to make a experiences or tra- to this loan apper marketing as tax return infor- nanies, and to ar | omit any important infor any investigation of my/o ansactions with my/our a lication; 2) originating th permitted by law. I/We mation consent, and auth by investor to whom Lene | mation. ur credit account. e loan; 3 e underst norization der may | I/We agree , either dire I/We unde B) servicing and that L as extend n sell all or a | e that ectly or rstan the I ender ot or ny pa | any property security or through any agency dand agree that Lencoan; 4) selling or trans will retain this apply to Lender, but also art of the loan, as we | ng the loan or cred by employed by Lender may obtain, use nsferring all or a p lication and any ot to to Third Parties, it all as to the affiliate | it will nder for e and art of ther continctudes, ago | not be used to or that purpos share my state the loan or a redit informat ling loan servi- ents, and any | ation or in any related document or any illegal or restricted properties. Lender may disclose to all e and federal tax return into y interest in it; and (5) into the core, any insurer of the loan successors and assigns of Lapplication, credit or loan. | urpose. Lend ony other inter ormation for pernal marketi f no loan or on, governmen | der is rested purpos ing an credit at ager | authorized to verif d parties informatio ses of: 1) reviewin ialysis, marketing to t is granted. Thes ncy loan guarantors |
| x | | | | | | | x | | | | | | |
| Applic | ant | | | | | Date | Co-Applicar | nt | | | | Date | 1 |

ASSETS AND LIABILITIES ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant: Application Number:

| Α | ssets | Liabilities | Liabilities | | | | | |
|-------------------------------------|----------------------|--|-------------|----------------|--|--|--|--|
| Checking and Savings Accounts | | Name and Address of Creditor | | | | | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | | | |
| | | | | • | | | | |
| | | | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | | | |
| | , | | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | | | |
| | | | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | | | |
| | | | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | | | |
| | L | | T. | 1. | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | | | |
| Stocks and Bonds Assets | Cook on Market Value | Name & Address of Company | Payment | Balance | | | | |
| Number Description | Cash or Market Value | | | | | | | |
| | \$ | | | | | | | |
| | \$ | Acct. No. | \$ | \$ | | | | |
| | \$ | Name & Address of Company | Payment | Balance | | | | |
| Life Insurance - Face Value | \$ | | 1 - 27 | | | | | |
| Real Estate Owned Assets | \$ | | | | | | | |
| Vested Interest in Retirement Funds | \$ | | | | | | | |
| Net Worth of Business Owned | \$ | Acct. No. | \$ | \$ | | | | |
| Automobiles Owned: | | Name & Address of Company | Payment | Balance | | | | |
| Year Make and Model | Cash or Market Value | | | | | | | |
| | \$ | | | | | | | |
| | \$ | | | | | | | |
| | \$ | Acct. No. | \$ | \$ | | | | |
| | \$ | Name & Address of Company | Payment | Balance | | | | |
| Other Assets Owned: | | | | | | | | |
| Description | Cash or Market Value | | | | | | | |
| | \$ | A-AN- | Ta | T ₀ | | | | |
| | \$ | Acct. No. | \$ | \$ | | | | |
| | \$ | Alimony/Child Support/Separate Maintenance Owed to | \$ | | | | | |
| | \$ | Job Related Expense | \$ | | | | | |
| | \$ | SSS TOOLS Experied | | | | | | |
| LIQUID ASSETS | \$ | TOTAL MONTHLY PAYMENTS | \$ | | | | | |
| TOTAL ASSETS | \$ | TOTAL LIABILITIES | _ | | | | | |
| NET WORTH | \$ | | | | | | | |

[&]quot;*" indicates obligations satisfied at or before loan closing.

| INTERVIEWER INFORMATION | | | | | |
|--|-------------------------------------|--------------|------|--|--|
| Originator Name | | Phone Number | Ext. | | |
| Originator NMLSR Identifier | Originator License State and Number | | | | |
| Company Name | | | | | |
| Company NMLSR Identifier | Company License State and Number | | | | |
| Company Address (street, city, state, ZIP) | | | | | |

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DRIVER'S LICENSE INFORMATION:

| APPLICANT: | |
|---------------|----------|
| DL#: | STATE: |
| ISSUED: | EXPIRES: |
| CO-APPLICANT: | |
| DL#: | STATE: |
| ICCUED. | EVDIDES: |