

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. **FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:**

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

.....
Consumer Date

.....
Consumer Date

CREDIT APPLICATION

IMPORTANT APPLICANT INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this 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.

<p>TYPE OF CREDIT REQUESTED</p> <p><input type="checkbox"/> Secured <input type="checkbox"/> Unsecured</p> <p><input type="checkbox"/> Individual Credit - relying on my income or assets.</p> <p><input type="checkbox"/> Individual Credit - relying on my income or assets as well as income or assets from other sources.</p> <p><input type="checkbox"/> Joint Credit - We intend to apply for joint credit. (initials) _____</p>	<p>First Savanna Savings Bank 301 Main St. Savanna, IL 61074</p> <p>LENDER'S NAME AND ADDRESS</p>	<p>Date of Application _____</p> <p>Amount \$ _____ How Long _____</p> <p>Payment Date Desired _____</p> <p>Want to Repay <input type="checkbox"/> Monthly <input type="checkbox"/> _____</p> <p>Purpose _____</p> <p>Acct. No. _____ Class _____</p>
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SECTION A - INDIVIDUAL APPLICANT INFORMATION

LAST FIRST M.I.

Name _____ Birth Date _____ Tel. No. _____ Soc. Sec. No. _____

Present Address _____ City _____ State _____ Zip _____ County _____ How Long _____

Previous Address _____ City _____ State _____ Zip _____ County _____ How Long _____

Have you applied for credit with us before? No Yes - When? _____ No. Dep. _____ Dep. Ages _____

Name of Nearest Relative Not Living With You _____ Relationship _____

Address _____ Tel. No. (____) _____

Employer (Company Name & Address) _____ How Long _____

Bus. Tel. _____ Position/Title _____ How Often Paid? _____ Take Home Salary Per Month \$ _____

Previous Employer (Company Name & Address) _____ How Long _____

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, separate maintenance received under: Court Order Written Agreement Oral Understanding

Sources of Other Income _____ Amount Per Month \$ _____

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.

LAST FIRST M.I.

Name _____ Birth Date _____ Tel. No. _____ Soc. Sec. No. _____

Present Address _____ City _____ State _____ Zip _____ County _____ How Long _____

Relationship To Applicant (If Any) _____ Have you applied for credit with us before? No Yes - When? _____ No. Dep. _____ Dep. Ages _____

Name of Nearest Relative Not Living With You _____ Relationship _____

Address _____ Tel. No. (____) _____

Employer (Company Name & Address) _____ How Long _____

Bus. Tel. _____ Position/Title _____ How Often Paid? _____ Take Home Salary Per Month \$ _____

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, separate maintenance received under: Court Order Written Agreement Oral Understanding

Sources of Other Income _____ Amount Per Month \$ _____

SECTION C - MARITAL STATUS

Complete only if: for joint or secured credit, or applicant resides in a community property state or is relying on property located in such a state. (*includes single, divorced and widowed)

Applicant Married Separated Unmarried* Other Party Married Separated Unmarried*

SECTION D - ASSET & DEBT INFORMATION

If Section B has been completed, this 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	VALUE
Checking Account Number(s) (where)		\$
Savings Account Number(s) (where)		
Other Assets (describe)		
TOTAL ASSETS		\$

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

CREDITOR	ACCOUNT NUMBER	NAME THE ACCT. IS UNDER	ORIGINAL AMT.	PRESENT BAL.	MO. PMTS.
Landlord or Mortgage Holder	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		(OMIT RENT)	(OMIT RENT)	
Automobiles (make, model, year)			\$	\$	\$
TOTAL DEBTS			\$	\$	\$

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 comaker, 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 last 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 and indicate if others have an ownership interest.

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 any): _____

SIGNATURES - I certify that everything I have stated in this application and on any attachments 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.