

PO Box 676
Keene, TX 76059
Fax 817-556-0335

Region 1
817-645-8861

Cleburne
Joshua
Keene
Mountain Valley
North Burleson
North Cleburne

Region 2
817-444-2504

Fort Worth LPO

Azle
Benbrook
Blue Mound
Eagle Ranch
Fossil Creek
Springtown

Credit Application

Amount requested \$ _____ # of Payments desired _____ Collateral _____ Loan Purpose _____

Section A – Applicant Information

Full Name (First, Middle Last,): _____ Birthdate: ____/____/____
 Present Street Address: _____ Years there: _____
 City: _____ State: _____ Zip: _____ Telephone: _____
 Mobile or Cell # _____
 Social Security #: _____ Driver's License #: _____ State _____ Exp _____
 Previous Address if above less than two years: _____ City: _____ State _____
 Present Employer: _____ Years there: _____ Phone # _____
 Position or Title: _____ Name of supervisor: _____

Email address: _____ **Work email:** _____

Previous Employer and Address: _____ Years there: _____

Present net Salary / commission: \$ _____ per _____ No. of Dependents: _____ Ages: _____

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: (check) court order _____ written agreement _____ oral understanding _____

Other Income: \$ _____ per _____ Source(s) of other income: _____

Is any income listed in this Section likely to be reduced in the next two years or before the credit requested is paid off? Yes ____ (Explain on separate sheet) No ____

Name of nearest relative not living with you: _____ Phone #: _____

Relationship: _____ Address: _____

Have you ever received credit from us? _____ When? _____

Checking Account #: _____ Institution and Branch _____

Section B – Joint Applicant, User, or Other Party Information (Use separate sheets if necessary)

Full Name (First, Middle, Last): _____ Birthdate: ____/____/____

Present Street Address: _____ Years there: _____

City: _____ State: _____ Zip: _____ Telephone: _____

Social Security #: _____ Driver's License #: _____ State _____ Exp _____

Present Employer: _____ Years there: _____ Phone #: _____

Present net Salary or commission: \$ _____ per _____ No. Dependents: _____ Ages: _____

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: (check) court order _____ written agreement _____ oral understanding _____

Other Income: \$ _____ per _____ Source(s) of other income: _____

Is any income listed in this Section likely to be reduced in the next two years or before the credit requested is paid off? Yes ____ (Explain on separate sheet) No ____

Section C – Marital Status

Applicant: ____ Married ____ Separated ____ Unmarried (Including single, divorced, and widowed)

Other Party: ____ Married ____ Separated ____ Unmarried (Including single, divorced, and widowed)

Section D: - Outstanding Debts (use separate sheet if necessary)

Creditor: Home _____ Balance \$ _____ Monthly Payment \$ _____

Creditor: _____ Balance \$ _____ Monthly Payment \$ _____

Creditor: _____ Balance \$ _____ Monthly Payment \$ _____

Creditor: _____ Balance \$ _____ Monthly Payment \$ _____

Are there any unsatisfied Judgements against you? Yes ____ No ____ If yes give Amount \$ _____ to whom owed? _____

Have you been declared bankrupt in the last 14 years Yes ____ No ____ If yes where? _____ Year _____

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

I am applying for individual credit in my own name and am relying on my own income or assets and not the income or assets of another Person as the basis for repayment of the credit requested.

We are applying for joint credit or an account that will be used by both of us. Married applicants may apply for separate Individual accounts.

We intend to apply for joint credit _____ / _____
 Applicant Joint Applicant
 Initials

Signatures: I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature

Date

Other Signature

Date