



# FIRST NORTHERN BANK

## Consumer Loan/Line of Credit Application

### IMPORTANT: READ THESE DIRECTIONS BEFORE COMPLETING APPLICATION

- (1) Married applicants may apply for separate credit.
- (2) You may apply for this credit in your name alone, or with someone else, regardless of your marital status. However, if you want the Bank to consider the future earnings of anyone else, the person must jointly apply with you whether or not he or she is your Spouse or California Registered Domestic Partner.
- (3) If this account is to be joint with a non-spouse, each applicant must complete a separate loan application.
- (4) If you are a California Registered Domestic Partner, complete the Co-Applicant section of this application.

I intend to apply for individual credit, in my name alone.

We intend to apply for joint credit, in both our names. Both applicants please initial here: \_\_\_\_\_  
Applicant Co-Applicant

### Description of Credit Request

Amount of Credit Requested: \$ _____	Credit Purpose: _____	Term (months): _____
<input type="checkbox"/> Reserve Account/Line of Credit Overdraft Protection <input type="checkbox"/> Savings Secured Loan <input type="checkbox"/> CD Secured Loan <input type="checkbox"/> Auto Loan - Refinance		
<input type="checkbox"/> Auto Loan – New auto <input type="checkbox"/> Auto Loan – Used auto            Automobile Purchase Price: \$ _____            Down Payment \$ _____		
Has either Applicant obtained credit under another name? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list names: _____		

### Optional Automatic Payment Service

Do you wish to have your monthly payment automatically deducted from your First Northern Bank (FNB) checking account? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, my FNB checking account number is: _____ (please attach deposit slip)
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### Section A – Primary Applicant Information

Full Legal Name:		Birth Date:		Social Security Number:	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)					
Driver's License Number/State ID Number:		ID Issue Date:		ID Expiration Date:	
Home Telephone Number:		Cell Number:		Email Address:	
Physical Street Address (No P.O. Box numbers): _____					
City:		State:	Zip Code:	How Long? _____ Years _____ Months	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Full Mailing Address (if different): _____					
Previous Address (if less than 2 years at current address): _____					
Self-Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Employer:	Position:	Telephone Number:	How Long? _____ Years _____ Months	
Previous Employer (if less than 2 years at current Employer):		Position:	Telephone Number:	How Long? _____ Years _____ Months	
<b>Note: Alimony, child support, or separate maintenance need not be revealed if the Applicant(s) do not choose to have it considered as a basis for determining creditworthiness.</b>					
Alimony, child support, or separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement					
Gross Employment Income per month: \$ _____	Gross Rental Income: \$ _____	Other Monthly Income: \$ _____		Source of other Monthly Income: _____	

### Section B – Co-Applicant Information

Full Legal Name:		Birth Date:		Social Security Number:	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)					
Driver's License Number/State ID Number:		ID Issue Date:		ID Expiration Date:	
Home Telephone Number:		Cell Number:		Email Address:	
Physical Street Address (No P.O. Box numbers): _____					
City:		State:	Zip Code:	How Long? _____ Years _____ Months	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Full Mailing Address (if different): _____					
Previous Address (if less than 2 years at current address): _____					
Self-Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Employer:	Position:	Telephone Number:	How Long? _____ Years _____ Months	
Previous Employer (if less than 2 years At current Employer):		Position:	Telephone Number:	How Long? _____ Years _____ Months	
<b>Note: Alimony, child support, or separate maintenance need not be revealed if the Applicant(s) do not choose to have it considered as a basis for determining creditworthiness.</b>					
Alimony, child support, or separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement					
Gross Employment Income per month: \$ _____	Gross Rental Income: \$ _____	Other Monthly Income: \$ _____		Source of other Monthly Income: _____	



# FIRST NORTHERN BANK

## Consumer Loan/Line of Credit Application, *continued*

### Section C - COLLATERAL INFORMATION – Complete when applying for Auto or Savings/CD Secured Loan

Year, Make and Model of Auto:		Lender on Vehicle Fill in only if applying for an auto refinance.	
FNB Savings or CD Account Information	FNB Account Number:	Type of Account:	Balance: \$

### Section D – Declarations Applicant Co-Applicant

Provide explanations for any Yes answers below on a separate sheet, attached to this application

Within the last 7 years, have you had property foreclosed upon or given Deed-in-Lieu?

Are you a party to a current lawsuit?

Are you a co-maker, endorser, or guarantor of any current loan or contract?

Are there any current outstanding judgements against you?

Are you presently delinquent or in default on any federal debt or tax lien?

Are you obligated to pay alimony, child support or separate maintenance?

List any previous bankruptcy(ies) filed by Applicant **and** Co-Applicant (if any) within the past 10 years

Year:	Type:	Amount: \$
Year:	Type:	Amount: \$

### Section E – Financial Statement

This Financial Statement may be completed jointly or individually by you and your Co-Applicant. If your combined assets and liabilities are sufficiently joined to that the Statement can be meaningfully and fairly presented on a combined basis, please select "Completed Jointly." Otherwise separate statements are required. In this case, please check, "Not Completed Jointly" and attach separate statements, as necessary.

Completed Jointly       Not Completed Jointly

Assets		
Description of Assets	Name Under Which Account is Held	Value
Checking Account Number(s) (where)		\$
Savings Account Number(s) (where)		\$
Estimated Value of Primary Residence (if owned)		\$
Estimated Value of Additional Real Property		\$
Securities/Retirement Accounts (where)		\$

### Debts and Expenses – attach an additional list of debts of there are more than will fit on this form

	Approximate Balance	Monthly Payment	To be Paid off with this loan?
First Mortgage/Monthly Rent Payment	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Second Mortgage	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Tax	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hazard Insurance (homeowners/flood)	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other (Association Fees, etc.)	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Auto/Vehicle Loan	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Auto/Vehicle Loan	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Credit Card Debt	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Credit Card Debt	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alimony, Child Support, Separate Maintenance Payments Owed to:	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Total Liabilities and Total Current Monthly Payments:</b>	<b>\$</b>	<b>\$</b>	

### Section F - Personal References

Applicant	Co-Applicant
Relative's Name (not living with you) and relationship	Relative's Name (not living with you) and relationship
Relative's Street Address	Relative's Street Address
City, State, ZIP	City, State, ZIP
Phone Number	Phone Number
Friend's Name (not related to you)	Friend's Name (not related to you)
Friend's Street Address	Friend's Street Address
City, State, ZIP	City, State, ZIP
Phone Number	Phone Number



# FIRST NORTHERN BANK

### IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

### Section G – Certification and Authorization – Signatures Required

I/We certify that the information provided in this application is true and correct and is given for the purpose of requesting First Northern Bank to extend a loan to Me/Us. I/We certify that there is no outstanding indebtedness to any other financial institution, finance or loan company, credit union or other lender, either as a borrower, co-borrower or guarantor, and that I have no other debts, bills, installment payments, other than as stated on this Application. I/We understand that any intentional or negligent misrepresentation(s) of this information made by Me/Us may result in civil liability and/or criminal penalties. I/We authorized First Northern Bank to obtain any and all information necessary to process this application and service the account if approved, including but not limited to, information concerning my/our employment, savings and checking deposits, and consumer credit and mortgage credit histories. I authorize First Northern Bank to obtain consumer credit reports either before or after any advance made to me. First Northern Bank may also furnish credit information about me to consumer credit reporting agencies.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*No Co-Applicant Signature required unless the signor is a Co-Applicant for this loan.* **Spouses:** If you are not a Co-Applicant, your signature serves to affirm the accuracy of the information set forth in this application to the extent it relates to Community Property.

### INCOME DOCUMENTATION CHECKLIST

We can provide timely processing of your application when we receive all the required income documents with the application. By following the checklist below, you will be assured of providing the necessary documentation for the type of income you receive. Provide photocopies of all supporting documents, not originals. Copies of tax returns should include all schedules you filed. Please sign and date all copies you provide.

Type of Income	Proof of Income Documents Required
<input type="checkbox"/> Salaried with NO OTHER income	<input type="checkbox"/> Current Pay Stub <input type="checkbox"/> Prior Year's W-2
<input type="checkbox"/> Salaried with Other Income	<input type="checkbox"/> Current Pay Stub <input type="checkbox"/> Prior Year's W-2 <input type="checkbox"/> Prior 2 year's Personal Federal Tax Returns (1040's) with Schedules
<input type="checkbox"/> Self-Employed	<input type="checkbox"/> Prior 2 year's Personal Federal Tax Returns (1040's) with Schedules <input type="checkbox"/> Profit and Loss Statement
<b>If you have Other Income – PLEASE NOTE: Alimony, child support or separate maintenance income need not be revealed if the Applicant(s) do not choose to have it considered as a basis for determining creditworthiness.</b>	
<input type="checkbox"/> Child Support/Alimony/Separate Maintenance	<input type="checkbox"/> Divorce Decree or Child Support Papers
<input type="checkbox"/> Rental Income	<input type="checkbox"/> Rental/Lease Agreement – if not on Tax Returns
<input type="checkbox"/> Retirement/Social Security	<input type="checkbox"/> 2 Month's Deposit Receipts or Awards Letter

### Should your loan request be approved, what are your preferences for the following?

Preferred Day of Month for Payment to be Due	Enter day of Month: _____
All Consumer Loans have a \$50 Loan Fee. How would you prefer to pay this fee?	<input type="checkbox"/> Pay Fee in Cash <input type="checkbox"/> Charge Fee to Loan Balance
Preferred loan funds disbursement method	<input type="checkbox"/> Deposit to FNB Account # _____ <input type="checkbox"/> Cashier's Check payable to: _____
<b>Savings and CD Secured Loan Only</b> – Preferred Date to Sign Loan Documents. Bank will make every attempt to accommodate your request	Enter Date: _____
<b>Savings and CD Secured Loan Only</b> – Repayment Terms	<input type="checkbox"/> Interest Only Monthly with Balloon Payment at Maturity <input type="checkbox"/> Equal Principal & Interest Monthly Payments Over Term

### TO BE COMPLETED BY BANK STAFF ONLY

Consumer Loan Application required original signatures. This application was received by:

Bank Staff Signature \_\_\_\_\_ Date Received \_\_\_\_\_ Office/Dept \_\_\_\_\_