

CREDIT APPLICATION

<div>TYPE OF CREDIT REQUESTED</div> <div><input type="checkbox"/> Secured <input type="checkbox"/> Unsecured</div> <div><input type="checkbox"/> Individual Credit - relying on my income or assets.</div> <div><input type="checkbox"/> Individual Credit - relying on my income or assets as well as income or assets from other sources.</div> <div><input type="checkbox"/> Joint Credit</div>	<div>FIRST NATIONAL BANK</div> <div>P.O. BOX 672</div> <div>ANSON, TEXAS 79501</div>	<div>Amount \$ _____ How Long _____</div> <div>Payment Date Desired _____</div> <div>Want to Repay <input type="checkbox"/> Monthly <input type="checkbox"/> _____</div> <div>Purpose _____</div> <div>Acct. No. _____ Class _____</div> <div>Cell Phone _____</div>
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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?			<input type="checkbox"/> No <input type="checkbox"/> Yes - When? _____		No. Dep. _____		Dep. Ages _____		
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 _____		
<div>Allimony, 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.</div> <div>Allimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding</div>									
Sources of Other Income _____			Amount Per Month \$ _____						
Name of Nearest Relative Not Living With You _____			Relationship _____						
Address _____			Tel. No. (____) _____						

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?		<input type="checkbox"/> No <input type="checkbox"/> Yes - When? _____		No. Dep. _____		Dep. Ages _____
(Company Name & Address) _____							How Long _____		
Bus. Tel. _____			Position/Title _____		How Often Paid? _____		Take Home Salary Per Month \$ _____		
<div>Allimony, 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.</div> <div>Allimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding</div>									
Sources of Other Income _____			Amount Per Month \$ _____						
Name of Nearest Relative Not Living With You _____			Relationship _____						
Address _____			Tel. No. (____) _____						

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 of	<input type="checkbox"/> Rent Payment		(OMIT RENT)	(OMIT RENT)	
Mortgage Holder	<input type="checkbox"/> Mortgage		\$	\$	\$
Automobiles (make, model, year)					
TOTAL DEBTS			\$	\$	\$

Complete the following about both the Applicant and Joint Applicant or Other Person (if applicable)

Are you obligated to make Allimony, 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. 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 Signature _____	Date _____	Other Signature (Where Applicable) _____	Date _____
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