



ARBOR BANK

Helping You Grow

Creditor

("You" means Applicant, *et al*; and "We" means Creditor)

Credit Application

Important Information to Applicant(s). 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 applies for a loan or opens an account. **What this means for you.** When you apply for a loan or 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. 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. **Read each instruction carefully before completing this form.**

1. Type of Application

Check only one of the three types:

Individual Credit - You are relying solely on your income or assets.

Individual Credit - You are relying on your income or assets as well as income or assets from other sources.

Joint Credit - By initialing below, you intend to apply for "joint credit".

Applicant _____

Joint Applicant _____

2. Type of Requested Credit

Application Date

Amount

\$

Security for Credit

Unsecured

Secured

No. of Months

First Payment Date

Proceeds of Credit to Be Used for (*describe*):

Applicant

3. Applicant Information

Joint Applicant or Other Party

Full Name (*First, Middle, Last*)

Full Name (*First, Middle, Last*)

Soc. Sec. No.

Date of Birth

Soc. Sec. No.

Date of Birth

Primary Phone

Cell

Second Phone

Cell

Primary Phone

Cell

Second Phone

Cell

Email Address:

Email Address:

Present Address

Own

Rent

No. of Yrs.:

Present Address

Own

Rent

No. of Yrs.:

Previous Address

Own

Rent

No. of Yrs.:

Previous Address

Own

Rent

No. of Yrs.:

Dependents

No.:

Ages:

Dependents

No.:

Ages:

Nearest Relative (*not living with you*)

Name:

Address:

Telephone:

Cell

Nearest Relative (*not living with you*)

Name:

Address:

Telephone:

Cell

Applicant

4. Marital Status

Joint Applicant or Other Party

Leave blank, unless:

(1) the credit will be secured, or

(2) you reside in a community property state, or

(3) you are relying on property, located in a community property state, as a basis for repayment.

Married (*as defined by state law; incl. domestic partnership, civil union*)

Separated

Unmarried (*including single, divorced, widowed*)

Leave blank, unless:

(1) the credit will be secured, or

(2) you reside in a community property state, or

(3) you are relying on property, located in a community property state, as a basis for repayment.

Married (*as defined by state law; incl. domestic partnership, civil union*)

Separated

Unmarried (*including single, divorced, widowed*)

Applicant		5. Employment Information		Joint Applicant or Other Party	
Employer Name: Address:	<input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.:	Employer Name: Address:	<input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.:		
Mgr.: Gross Monthly Salary/Comm.: \$ Position/Title:	Phone:	Mgr.: Gross Monthly Salary/Comm.: \$ Position/Title:	Phone:		
Employer Name: Address:	<input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.:	Employer Name: Address:	<input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.:		
Mgr.: Gross Monthly Salary/Comm.: \$ Position/Title:	Phone:	Mgr.: Gross Monthly Salary/Comm.: \$ Position/Title:	Phone:		

Applicant		6. Other Income		Joint Applicant or Other Party	
Alimony, child support, or separate maintenance income <u>need not</u> be revealed if you do not wish to have it considered as a basis for repaying this obligation.		Alimony, child support, or separate maintenance income <u>need not</u> 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: <input type="checkbox"/> Court order <input type="checkbox"/> Written agreement <input type="checkbox"/> Oral understanding		Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court order <input type="checkbox"/> Written agreement <input type="checkbox"/> Oral understanding			
Other Income: \$ Source:	per Month	Other Income: \$ Source:	per Month		
Is any income listed in Sections 4, 5 or 6 likely to be reduced before the credit is paid off: <input type="checkbox"/> Yes (Explain in section 10.) <input type="checkbox"/> No		Is any income listed in Sections 4, 5 or 6 likely to be reduced before the credit is paid off: <input type="checkbox"/> Yes (Explain in section 10.) <input type="checkbox"/> No			

7. Asset and Debt Information
If the "Joint Applicant" or "Other Party" Sections were completed, this Section should be completed by giving information about both the Applicant, and the Joint Applicant or Other Party, if applicable.

Assets Owned				
Type of Asset or Description	Account Number	Current Market Value	Remaining Balance of Lien (Enter "0" if none)	Asset Owner's Name
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
<input type="checkbox"/> Amounts from Continuation Form		\$	\$	
Total Assets		\$	\$	

Outstanding Debts (This section should be charge accounts, installment contracts, credit cards, rent, mortgages and other obligations.)						
Creditor Name	Type of Debt, or Account Number	Original Amount	Present Balance	Monthly Payment	Debtor's Name	Past Due (Yes/No)
Landlord	<input type="checkbox"/> Rent Payment			\$		
	<input type="checkbox"/> Mortgage	\$	\$	\$		
		\$	\$	\$		
		\$	\$	\$		
		\$	\$	\$		
		\$	\$	\$		
<input type="checkbox"/> Amounts from Continuation Form		\$	\$	\$		
Total Debts		\$	\$	\$		

<i>Applicant</i>	8. Other Obligations	<i>Joint Applicant or Other Party</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount: \$ For whom: To whom:	Are you a co-maker, endorser, co-signer, surety, or guarantor on any loan, contract or other obligation?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount: \$ For whom: To whom:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:	Are there any unsatisfied judgments against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Where: Year:	Have you been declared bankrupt in the last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Where: Year:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:	Are you obligated to make Alimony, Support or Maintenance Payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:

9. Property Information (if secured)		
Property Type <input type="checkbox"/> Boat or Vessel <input type="checkbox"/> Certificate of Deposit <input type="checkbox"/> Deposit Account <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Motor Vehicle <input type="checkbox"/>	Property Description <input type="checkbox"/> Residential Dwelling <input type="checkbox"/> Homestead Property	Property Location and Address
Primary Use of Property <input type="checkbox"/> Agricultural <input type="checkbox"/> Business <input type="checkbox"/> Consumer	Property Owner(s) Names & Addresses	

10. Additional Information or Explanations

11. Certifications, Authorizations and Signatures								
<p>You certify that everything you have stated in this Credit Application and on any other documents submitted to us are true and correct to the best of your knowledge. You understand that you must update the information contained in this Credit Application if either your financial condition materially changes or we make a request to you orally or in writing. You understand that we will retain this Credit Application whether or not it is approved.</p> <p>You authorize us to request one or more consumer reports, to check and verify your credit and employment history, and to answer questions others may ask us about our credit experience with you.</p> <p>You authorize us to contact you using any of the telephone numbers listed on this Credit Application or that you subsequently provide us in connection with your credit account - regardless whether the number we use is assigned to a paging service, cellular telephone service, specialized mobile radio service, other radio common carrier service or any other service for which you may be charged for the call. You further authorize us to contact you through the use of voice, text and email and through the use of prerecorded/artificial voice messages or an automatic dialing device.</p> <p><input type="checkbox"/> Electronic Signature. If checked, You further agree that you have signed this <i>Credit Application</i> with one or more electronic signatures. You intend your electronic signature to have the effect of your written ink signature. You viewed and read the entire <i>Credit Application</i> and notices before you signed it. You received a paper copy of this <i>Credit Application</i> after it was signed. You understand that this <i>Credit Application</i> is in the electronic form that we will keep. We may rely on, and enforce, this <i>Credit Application</i> in the electronic form or as a paper version of the electronic form.</p>								
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-top: 1px solid black; border-bottom: 1px solid black;">Applicant Signature</td> <td style="width: 10%; border-top: 1px solid black; border-bottom: 1px solid black;">Date</td> <td style="width: 50%; border-top: 1px solid black; border-bottom: 1px solid black;">Joint Applicant, or Other Party, Signature</td> <td style="width: 10%; border-top: 1px solid black; border-bottom: 1px solid black;">Date</td> </tr> <tr> <td colspan="4" style="text-align: center; padding-top: 10px;"><i>(if applicable)</i></td> </tr> </table>	Applicant Signature	Date	Joint Applicant, or Other Party, Signature	Date	<i>(if applicable)</i>			
Applicant Signature	Date	Joint Applicant, or Other Party, Signature	Date					
<i>(if applicable)</i>								

Notice: It is a federal crime punishable by fine, imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code § 1001, *et seq.*

Mortgage Loan Originator Information
<p>If this <i>Credit Application</i> is secured by a consumer's residential dwelling that is owned by you, we may be required under federal or state law to disclose our mortgage loan origination identification number(s), which are as follows, if applicable:</p> <ul style="list-style-type: none"> ◆ Mortgage Loan Originator Name and Identifier: ◆ Mortgage Loan Origination Company Name and Identifier:

For Creditor Use					
Date Received	Received By	Date Action Taken	Action Taken By	Action Taken	Reason Code(s)

Credit and Insurance Disclosure



ARBOR BANK

Helping You Grow

Part I

I have applied for an extension of credit with you. Your affiliate, First Express Insurance, may offer to sell me an insurance product or annuity in connection with this extension of credit. I understand that YOU MAY NOT CONDITION THE EXTENSION OF CREDIT ON EITHER:

- ◆ My purchase of insurance or an annuity from Your affiliate, First Express Insurance; or
◆ My agreement to not obtain insurance or an annuity from an entity not affiliated with You.

In addition, you may not prohibit me from obtaining insurance or an annuity from an entity not affiliated with you.

Part II

If I purchase an insurance or annuity product from your affiliate, First Express Insurance, I understand the following:

- ◆ The product is NOT A DEPOSIT ACCOUNT OR OTHER OBLIGATION of any depository institution or any affiliate of any depository institution.
◆ The product is NOT GUARANTEED OR INSURED by any depository institution or any affiliate of any depository institution.
◆ The product is NOT INSURED by the Federal Deposit Insurance Corporation (FDIC).
◆ The product is NOT INSURED by any federal government agency, except in the case of Federal Flood Insurance.

By signing below, I acknowledge that I have read, received and understand this insurance disclosure, and that Arbor Bank has provided this disclosure to me verbally, unless this disclosure is provided electronically or I have applied for credit by mail.

Signature of Client(s) Date

Signature of Client(s) Date

Part III

I hereby authorize Arbor Bank to provide First Express Insurance with information concerning myself and my financial matters, including insurance coverage information obtained from any lending relationship. This information will remain confidential and will be used only in connection with the insurance services provided to me by First Express Insurance.

Printed Name of Client(s)

Signature of Client(s) Date

Signature of Client(s) Date