

CONSUMER LOAN APPLICATION (APPCENTER VERSION)

| CREDIT REQUESTED | | | | COLLATERAL OFFERED | | | |
|---|---------------|-----------------------|----------|--|--|--------------------|----------|
| Amount Requested | # of Payments | Preferred Payment Day | | <input type="checkbox"/> Real Estate <input type="checkbox"/> Deposit Account/Investments <input type="checkbox"/> Titled / Vehicle <input type="checkbox"/> Other <input type="checkbox"/> Unsecured | | | |
| Description of Collateral Offered | | | | | | | |
| Purpose of Credit Request | | | | | | | |
| Loan Type (i.e. Installment, Credit Line) | | | | Credit <input type="checkbox"/> A HELOC <input type="checkbox"/> A Home Equity Loan Requested is: <input type="checkbox"/> A Home Improvement Loan | | | |
| APPLICANT | | | | CO-APPLICANT | | | |
| If the Applicant is married, he or she may apply for individual credit. | | | | | | | |
| Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer | | | | Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer | | | |
| Name | | | | Name | | | |
| Date of Birth | | SSN | | Date of Birth | | SSN | |
| Driver's Lic. # | | Exp. Date | | Driver's Lic. # | | Exp. Date | |
| Home Street Address | | | Yrs/Mos. | Home Street Address | | | Yrs/Mos. |
| City, State, Zip | | | County | City, State, Zip | | | County |
| Home Phone | | Cell Phone | | Home Phone | | Cell Phone | |
| E-Mail Address | | | | E-Mail Address | | | |
| # of Dependents | | Ages of Dependents | | # of Dependents | | Ages of Dependents | |
| Previous Address (if current less than 2 years) | | | Yrs/Mos. | Previous Address (if current less than 2 years) | | | Yrs/Mos. |
| City, State, Zip | | | | City, State, Zip | | | |
| EMPLOYMENT INFORMATION - APPLICANT | | | | CO-APPLICANT | | | |
| Business Name/Employer <input type="checkbox"/> Self Employed | | | | Business Name/Employer <input type="checkbox"/> Self Employed | | | |
| Business/Employer Street Address | | | | Business/Employer Street Address | | | |
| City, State, Zip | | | | City, State, Zip | | | |
| Business Phone | | Monthly Income | | Business Phone | | Monthly Income | |
| Position/Title | | From | To | Position/Title | | From | To |
| Previous Business Name/Employer <input type="checkbox"/> Self Employed | | | | Previous Business Name/Employer <input type="checkbox"/> Self Employed | | | |
| Business/Employer Street Address | | | | Business/Employer Street Address | | | |
| City, State, Zip | | | | City, State, Zip | | | |
| Business Phone | | Monthly Income | | Business Phone | | Monthly Income | |
| Position/Title | | From | To | Position/Title | | From | To |

| PERSONAL REFERENCES - APPLICANT | | CO-APPLICANT | |
|---------------------------------|--------------|--------------|--------------|
| Name | Relationship | Name | Relationship |
| Address | Phone | Address | Phone |
| Name | Relationship | Name | Relationship |
| Address | Phone | Address | Phone |
| Name | Relationship | Name | Relationship |
| Address | Phone | Address | Phone |

ABOUT YOUR EXISTING LOANS AND ACCOUNTS

Rent Home Own Home in the following names:

| Monthly Payment / Rent | Purchase Price | Date Purch. | Present Value | Original Loan Amount | Current Loan Balance |
|------------------------|----------------|-------------|---------------|----------------------|----------------------|
| \$ | | | | | |

Name and Address of Mortgage Holder or Landlord

Name of My Financial Institution Checking Account # Savings Account #

OTHER INCOME (IF ANY) - Indicate Monthly Values (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.)

| Interest / Dividends | Rental Income | Other Income | Describe "Other Income" Source |
|----------------------|---------------|--------------|--------------------------------|
| \$ | \$ | \$ | |

ASSETS LOANS OR OTHER OBLIGATIONS

| Category | Value | Category | Amt Owed | Monthly Payment |
|---------------------------------|-------|--------------------------|----------|-----------------|
| Cash/Deposits | \$ | | | |
| Stocks or Bonds | \$ | | | |
| Automobiles | \$ | Auto Loans | \$ | \$ |
| Real Estate | \$ | Real Estate Loans | \$ | \$ |
| Life Insurance (Face Value: \$) | \$ | Life Insurance Loans | \$ | \$ |
| Retirement Funds | \$ | Credit Card Debt | \$ | \$ |
| Other Assets | \$ | Other Obligations | \$ | \$ |
| Total Assets | \$ | Total Liabilities | \$ | \$ |
| | | Net Worth | \$ | |

QUESTIONS

| Applicant | Co-Applicant | Explanation (Please use an additional sheet if necessary.) |
|--|--|--|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are there any outstanding judgments against you? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you ever been declared bankrupt? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you a party to a lawsuit? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you obligated on any loan resulting in judgment, foreclosure or title transfer? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you delinquent, in default on any Federal debt, financial obligation, bond, or loan guarantee? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you obligated to pay alimony, child support or separate maintenance? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Is any part of the down payment borrowed? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you a co-maker or an endorser on a loan? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you ever had merchandise repossessed? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you ever been denied credit with us? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you a U.S. citizen? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | If no, are you a resident alien? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | If no, are you a non-resident alien? |

APPLICANT SIGNATURES

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

We intend to apply for joint credit _____ (Initial) _____ (Initial)
Applicant Co-Applicant

APPLICANT:

X _____ Date X _____ Date
Applicant Co-Applicant

TO BE COMPLETED BY INTERVIEWER

Application Taken By: Face to Face Interview Mail Telephone Internet

Interviewer Interviewer's Phone Interviewer's Employer Name/Address
FIRST NATIONAL BANK IN ORD, 1411 'M' STREET, P.O. BOX 248, ORD, NE 68862

App # Branch Product Market Survey

Mortgage Loan Originator Unique Identifier, if applicable: Mortgage Loan Origination Company Identifier, if applicable: