

# CONSUMER LOAN APPLICATION

## CREDIT REQUESTED

|   |                |               |                     |                    |               |
|---|----------------|---------------|---------------------|--------------------|---------------|
| Account Requested<br><input type="checkbox"/> Individual <input type="checkbox"/> Joint<br>We intend to apply for joint credit. | Amt. Requested | # of Payments | Preferred Pmt. Amt. | Preferred Pmt. Day | Market Survey |
| Specific Purpose of Loan  |                |               |                     |                    |               |
| Collateral Offered  |                |               |                     |                    |               |
| Applicant      Co-Applicant   |                |               |                     |                    |               |

## COMPLETION INSTRUCTIONS FOR APPLICANT

Complete the Applicant Information section for the first Applicant. Mark the appropriate box to indicate whether the Applicant is applying as a Borrower, Cosigner, Guarantor, Grantor (of collateral), or Other for a different capacity. If the Applicant is married, he or she may apply for individual credit.

## APPLICANT INFORMATION:      Borrower   Cosigner   Guarantor   Grantor   Other:

|   |               |                         |                          |                    |                             |
|---|---------------|-------------------------|--------------------------|--------------------|-----------------------------|
| Applicant's Full Name (First M.I. Last) |               | Social Security Number  | Former Names and Aliases |                    |                             |
| Home Phone                              | Date of Birth | Driver's License Number | Ages of Dependents       | Years of Education | Years in Current Profession |

## ADDRESS INFORMATION

|   |  |       |   |
|---|--|-------|---|
| Home Address (Street, City, State, Zip Code) (If rural, show Road and Box No) |  | Since | <input type="checkbox"/> Own<br><input type="checkbox"/> Rent |
| Mailing Address (Street or P.O. Box, City, State, Zip Code)                   |  |       |   |
| Previous Home Address (Street, City, State, Zip Code)                         |  |       | From      To  |

## EMPLOYMENT INFORMATION

|  |            |  |                  |       |            |
|--|------------|--|------------------|-------|------------|
| Applicant's Employer (If Self-Employed, Name and Nature of Business) |            | Business Address (Street, City, State, Zip Code) |                  |       |            |
| Type of Business   | Supervisor | Phone Number                                     | Title / Position | Since | Salary per |
| Second Employer (If Self-Employed, Name and Nature of Business)      |            | Business Address (Street, City, State, Zip Code) |                  |       |            |
| Type of Business   | Supervisor | Phone Number                                     | Title / Position | Since | Salary per |

## PERSONAL REFERENCES

| Name | Address (Street or P.O. Box, City, State, Zip Code) | Phone Number | Relationship |
|------|---|--------------|--------------|
|      |   |              |              |
|      |   |              |              |
|      |   |              |              |

## COMPLETION INSTRUCTIONS FOR CO-APPLICANTS

(a) If you are applying for joint credit or will be permitted to use the account, complete the Co-Applicant Information section as a Borrower. (b) If the Applicant is applying for individual credit, but relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete the Co-Applicant Information section, to the extent possible, providing information about the person on whose alimony, support, or maintenance payments or income or assets the Applicant is relying. (c) If the Applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested, complete the Co-Applicant Information section with regard to the Applicant's spouse.

## CO-APPLICANT INFORMATION:      Borrower   Cosigner   Guarantor   Grantor   Other:

|  |               |                         |                          |                    |                             |
|--|---------------|-------------------------|--------------------------|--------------------|-----------------------------|
| Co-Applicant's Full Name (First M.I. Last) |               | Social Security Number  | Former Names and Aliases |                    |                             |
| Home Phone                                 | Date of Birth | Driver's License Number | Ages of Dependents       | Years of Education | Years in Current Profession |

## ADDRESS INFORMATION

|   |  |       |   |
|---|--|-------|---|
| Home Address (Street, City, State, Zip Code) (If rural, show Road and Box No) |  | Since | <input type="checkbox"/> Own<br><input type="checkbox"/> Rent |
| Mailing Address (Street or P.O. Box, City, State, Zip Code)                   |  |       |   |
| Previous Home Address (Street, City, State, Zip Code)                         |  |       | From      To  |

**EMPLOYMENT INFORMATION**

|   |            |              |                  |  |            |  |
|---|------------|--------------|------------------|--|------------|--|
| Co-Applicant's Employer (If Self-Employed, Name and Nature of Business) |            |              |                  | Business Address (Street, City, State, Zip Code) |            |  |
| Type of Business  | Supervisor | Phone Number | Title / Position | Since  | Salary per |  |
| Second Employer (If Self-Employed, Name and Nature of Business)         |            |              |                  | Business Address (Street, City, State, Zip Code) |            |  |
| Type of Business  | Supervisor | Phone Number | Title / Position | Since  | Salary per |  |

**PERSONAL REFERENCES**

| Name | Address (Street or P.O. Box, City, State, Zip Code) | Phone Number | Relationship |
|------|---|--------------|--------------|
|      |   |              |              |
|      |   |              |              |
|      |   |              |              |

**QUESTIONS**

| Applicant (1)  | Co-Applicant (2)   | Question  | Explanation (Please use an attached 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 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 this lender?  |  |
| <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?  |  |

**PREVIOUS CREDIT REFERENCES**

| Names Credit Listed In   | Loan Purpose | Creditor Name and Address | Account Number | Highest Balance | Date Paid |
|--|--------------|---------------------------|----------------|-----------------|-----------|
| <input type="checkbox"/> App <input type="checkbox"/> CoApp <input type="checkbox"/> Other |              |                           |                | \$              |           |
| <input type="checkbox"/> App <input type="checkbox"/> CoApp <input type="checkbox"/> Other |              |                           |                |                 |           |
| <input type="checkbox"/> App <input type="checkbox"/> CoApp <input type="checkbox"/> Other |              |                           |                |                 |           |
| <input type="checkbox"/> App <input type="checkbox"/> CoApp <input type="checkbox"/> Other |              |                           |                |                 |           |

**SCHEDULE OF OTHER INCOME**

NOTICE: 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  Court Order  Written Agreement  Oral Understanding  Other

**PARTIES** INCOME TYPES: A=Alimony/Child Support B=Bonuses C=Commissions I=Interest & Dividends O=Overtime R=Retirement X=Other

| App | CoA | Joint | Type | Description | Amount | Frequency |
|-----|-----|-------|------|-------------|--------|-----------|
|     |     |       |      |             |        |           |
|     |     |       |      |             |        |           |
|     |     |       |      |             |        |           |
|     |     |       |      |             |        |           |

**SCHEDULE OF REAL ESTATE OWNED**

**PARTIES** TYPES: S=Single Family D=Duplex T=Triplex F=Four-Plex C=Condominium P=P.U.D. L=Land O=Summary/Other

|     |     |       |                             |  |                     |                     |   |
|-----|-----|-------|-----------------------------|--|---------------------|---------------------|---|
| App | CoA | Joint | Type:                       | Property Disposition: <input type="checkbox"/> Sold <input type="checkbox"/> Pending Sale <input type="checkbox"/> Rental <input type="checkbox"/> N/A |                     |                     |   |
|     |     |       | Description                 | Property Address   | Date Acquired       | Cost                | Principal Residence<br><input type="checkbox"/> Yes <input type="checkbox"/> No           |
|     |     |       | Current Market Value        | Total Mortgages & Liens  | Gross Rental Income | Taxes, Ins., Maint. | Net Rental Income   |
|     |     |       | Creditor 1 Name and Address |  | Unpaid Bal.         | Pmt. Amt. Per       | Lien Position <input type="checkbox"/> First Lien<br><input type="checkbox"/> Junior Lien |
|     |     |       | Creditor 2 Name and Address |  | Unpaid Bal.         | Pmt. Amt. Per       | Lien Position <input type="checkbox"/> First Lien<br><input type="checkbox"/> Junior Lien |

|     |     |       |                             |  |                     |                     |   |
|-----|-----|-------|-----------------------------|--|---------------------|---------------------|---|
| App | CoA | Joint | Type:                       | Property Disposition: <input type="checkbox"/> Sold <input type="checkbox"/> Pending Sale <input type="checkbox"/> Rental <input type="checkbox"/> N/A |                     |                     |   |
|     |     |       | Description                 | Property Address   | Date Acquired       | Cost                | Principal Residence<br><input type="checkbox"/> Yes <input type="checkbox"/> No           |
|     |     |       | Current Market Value        | Total Mortgages & Liens  | Gross Rental Income | Taxes, Ins., Maint. | Net Rental Income   |
|     |     |       | Creditor 1 Name and Address |  | Unpaid Bal.         | Pmt. Amt. Per       | Lien Position <input type="checkbox"/> First Lien<br><input type="checkbox"/> Junior Lien |
|     |     |       | Creditor 2 Name and Address |  | Unpaid Bal.         | Pmt. Amt. Per       | Lien Position <input type="checkbox"/> First Lien<br><input type="checkbox"/> Junior Lien |

|     |     |       |                             |  |                     |                     |   |
|-----|-----|-------|-----------------------------|--|---------------------|---------------------|---|
| App | CoA | Joint | Type:                       | Property Disposition: <input type="checkbox"/> Sold <input type="checkbox"/> Pending Sale <input type="checkbox"/> Rental <input type="checkbox"/> N/A |                     |                     |   |
|     |     |       | Description                 | Property Address   | Date Acquired       | Cost                | Principal Residence<br><input type="checkbox"/> Yes <input type="checkbox"/> No           |
|     |     |       | Current Market Value        | Total Mortgages & Liens  | Gross Rental Income | Taxes, Ins., Maint. | Net Rental Income   |
|     |     |       | Creditor 1 Name and Address |  | Unpaid Bal.         | Pmt. Amt. Per       | Lien Position <input type="checkbox"/> First Lien<br><input type="checkbox"/> Junior Lien |
|     |     |       | Creditor 2 Name and Address |  | Unpaid Bal.         | Pmt. Amt. Per       | Lien Position <input type="checkbox"/> First Lien<br><input type="checkbox"/> Junior Lien |

**CREDIT LIFE AND DISABILITY INSURANCE**

Applicant desires the following voluntary insurance:  Credit Life  Credit Disability  Involuntary Unemployment  
 Co-Applicant desires the following voluntary insurance:  Credit Life  Credit Disability  Involuntary Unemployment

**APPLICANT SIGNATURE(S)**

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.

**APPLICANT:**

X \_\_\_\_\_ Date \_\_\_\_\_ X \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant Co-Applicant

**FOR LENDER'S USE ONLY**

|  |                  |  |                |               |
|--|------------------|--|----------------|---------------|
| Officer No. / Name   | Approved By      | Concurrence By (If Needed)                                   | Committee Date | Decision Date |
| Branch<br>00   | Application Date | Application No.  | Commitment No. | Loan No.      |
| Originator Name  |                  | Loan Origination Company's Name                              |                |               |
| Mortgage Loan Originator Unique Identifier, if applicable: |                  | Mortgage Loan Origination Company Identifier, if applicable: |                |               |

Decision and Comments:  Approved  Denied  Incomplete  Counteroffer  Conditional Approval  Withdrawal  Other: \_\_\_\_\_



**APPLICANT SIGNATURES**

I/We hereby apply for the loan or credit described in this application on behalf of the applicant business. I/We certify that I/we made no misrepresentation 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 the 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 any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

**APPLICANT:**

X \_\_\_\_\_  
Authorized Signer Date

**RIGHT TO REQUEST SPECIFIC REASONS FOR DENIAL**

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact:

**SECURITY STATE BANK OF KENYON**  
**SECURITY STATE BANK**  
Attn: \_\_\_\_\_  
602 2ND STREET  
KENYON, MN 55946

within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

**EQUAL CREDIT OPPORTUNITY ACT NOTICE**

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is:

**FDIC Consumer Response Center**  
1100 Walnut St, Box #11  
Kansas City, MO 64106  
Toll-free: (877) 275-3342

**AUTHORIZATION TO FILE UCC FINANCING STATEMENT**

By signing this application you authorize lender to file a financing statement (Form UCC-1) naming the Borrower as debtor and covering the personal property described above as collateral.

**FOR LENDER'S USE ONLY**

|                    |                  |                            |                |               |
|--------------------|------------------|----------------------------|----------------|---------------|
| Officer No. / Name | Approved By      | Concurrence By (If Needed) | Committee Date | Decision Date |
| Branch<br>00       | Application Date | Application No.            | Commitment No. | Loan No.      |

Decision and Comments:  Approved  Denied  Incomplete  Counteroffer  Conditional Approval  Withdrawal  Other: \_\_\_\_\_

# INSURANCE DISCLOSURE FOR CREDIT APPLICATION

**Applicant:**

**Lender:**

SECURITY STATE BANK OF KENYON  
SECURITY STATE BANK  
602 2ND STREET  
KENYON, MN 55946  
(507) 789-6123

## IMPORTANT

DO NOT SIGN THIS FORM UNTIL YOU CAREFULLY  
READ IT AND UNDERSTAND ITS CONTENT

### Purpose.

You have submitted an application for a loan. In connection with your loan application, Lender may be soliciting, offering to sell, or will sell you an insurance product or annuity. Federal law requires Lender to provide you with the following disclosures.

### Credit Disclosures.

1. Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from Lender or any of its affiliates.
2. Lender, as a condition of granting you a loan, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.

### Acknowledgment.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.

APPLICANT:

X \_\_\_\_\_  
Date