

# OZARK MOUNTAIN BANK APPLICATION FOR CREDIT

**IMPORTANT: Please read these directions before completing this Application**

If you are applying for individual credit in your own name, and are relying on your own income and assets and not the income and assets of another person as the basis for repayment of the credit requested, complete Section 1. If the requested credit is also to be secured, also complete the first part of Section 3 and Section 4.

If you are applying for joint credit with another person, complete all sections except 4, providing information in 2 about the joint applicant. If the requested credit is to be secured, then complete Section 4  
 WE INTEND TO APPLY FOR JOINT CREDIT                      APPLICANT \_\_\_\_\_                      CO-APPLICANT \_\_\_\_\_

If you are applying for individual credit, but are 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 all Sections except 4 to the extent possible, providing information in 2 about the person on whose alimony, support, maintenance payments or income or assets you are relying. If the requested credit is to be secured, then complete Section 4.

### IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act 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, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

AMOUNT REQUESTED \$	PAYMENT DATE DESIRED	PROCEEDS OF CREDIT TO BE USED FOR	
<b>SECTION 1 - APPLICANT INFORMATION</b>			
FULL NAME	BIRTH DATE	HOME PHONE	BUSINESS PHONE CELL PHONE
DRIVERS LICENSE NO.	STATE	DATE OF EXPIRATION	SOCIAL SECURITY NO. OR TAX I.D. NO.
PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS (STREET, CITY, STATE, & ZIP)			HOW LONG AT PRESENT ADDRESS?
LANDLORD OR MORTGAGE HOLDER		<input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE	MONTHLY PAYMENT
PREVIOUS ADDRESS (STREET, CITY, STATE, & ZIP)			HOW LONG AT PREVIOUS ADDRESS?
EMAIL ADDRESS			
PRESENT EMPLOYER (COMPANY NAME & ADDRESS)		POSITION OR TITLE	HOW LONG WITH THIS EMPLOYER?
PREVIOUS EMPLOYER (COMPANY NAME & ADDRESS)			HOW LONG WITH THIS EMPLOYER?
YOUR PRESENT GROSS SALARY OR COMMISSION \$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER	# AND AGES OF DEPENDANTS	
<b>Alimony, child support, or maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.</b> Alimony, child support, or separate maintenance received under: _____ Court Order _____ Written Agreement _____ Oral Understanding			
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME		
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE NUMBER
<b>SECTION 2 - JOINT APPLICANT OR OTHER PARTY INFORMATION</b>			
FULL NAME	BIRTH DATE	HOME PHONE	BUSINESS PHONE CELL PHONE
DRIVERS LICENSE NO.	STATE	DATE OF EXPIRATION	SOCIAL SECURITY NO. OR TAX I.D. NO.
PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS (STREET, CITY, STATE, & ZIP)			HOW LONG AT PRESENT ADDRESS?
PREVIOUS ADDRESS (STREET, CITY, STATE, & ZIP)			HOW LONG AT PREVIOUS ADDRESS?
EMAIL ADDRESS			
PRESENT EMPLOYER (COMPANY NAME & ADDRESS)		POSITION OR TITLE	HOW LONG WITH THIS EMPLOYER?
PREVIOUS EMPLOYER (COMPANY NAME & ADDRESS)			HOW LONG WITH THIS EMPLOYER?
YOUR PRESENT GROSS SALARY OR COMMISSION \$ PER	YOUR PRESENT NET SALARY OR COMMISSION \$ PER	# AND AGES OF DEPENDANTS	
<b>Alimony, child support, or maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.</b> Alimony, child support, or separate maintenance received under: _____ Court Order _____ Written Agreement _____ Oral Understanding			
OTHER INCOME \$ PER	SOURCES OF OTHER INCOME		
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		RELATIONSHIP	TELEPHONE NUMBER
<b>SECTION 3 - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)</b>			
APPLICANT	_____ Married	_____ Separated	_____ Unmarried (including single, divorced, or widowed)
OTHER PARTY	_____ Married	_____ Separated	_____ Unmarried (including single, divorced, or widowed)
<b>SECTION 4 - SECURED CREDIT (Complete only if credit is to be secured.) Briefly describe the property to be given as security:</b>			
PROPERTY DESCRIPTION			
IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (if any):			
CREDIT DISCLOSURES: An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity <b>not a deposit or other obligation of, or guaranteed by</b> , this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity <b>not insured by</b> the federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an <b>investment risk</b> , there is <b>investment risk</b> associated with the insurance product, including the <b>possible loss of value</b> . If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.			
<b>SIGNATURES</b>			
Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and answer questions about your credit experience with me.		Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and answer questions about your credit experience with me.	
APPLICANT'S SIGNATURE	DATE	OTHER SIGNATURE (Where Applicable)	DATE
DATE APPLICATION RECEIVED		RECEIVED BY	