



FIRST NATIONAL BANK

BROKEN ARROW

LOAN REQUEST INFORMATION	Please type or complete in ink.		
	Please check type(s) of loan applied for:		Amount Requested
	<input type="checkbox"/> Auto/Boat (Please complete section "To Be Financed")	\$ _____	_____ Years
	<input type="checkbox"/> Other (Specify) _____	\$ _____	_____ Years
	<input type="checkbox"/> Personal Line of Credit/Reserve Checking	\$ _____	
	Purpose of Loan _____		
	This application is for: (a married co-applicant may apply for an individual account)		Are you a US citizen? Yes No
	<input type="checkbox"/> Individual Account <input type="checkbox"/> Joint Account with Co-applicant (if you have a co-applicant please have them complete the co-applicant section).		
	For Community Property State This Application is Based Upon <input type="checkbox"/> My (Our) Marital Community <input type="checkbox"/> My Sole and Separate Property and Income.		

TO BE FINANCED	Auto/Boat (Please complete if applying for auto or boat loan and attach additional sheets if necessary.)		
	Make	Model	Year
	Serial Number (If available)	Engine Type	Purchase Price
	If used, liens outstanding		Dealer Name

APPLICATION INFORMATION	Personal (Do not check a box if applying for individual, unsecured credit.) Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated			
	Name (Last) (First) (Initial)	Social Security Number	Date of Birth	Age
	Address	Drivers License Number	Home Phone Number ()	
	City, State, Zip	<input type="checkbox"/> Own <input type="checkbox"/> Rent	How Long Yrs. Mos.	No. Dependents
	Previous Address (if less than 5 years at present address)	How Long Yrs. Mos.	Any Other Name Used for Credit Purposes	
	Name of Nearest Relative Not Living With You	Address	Relationship	Home Phone Number ()
	Name of Personal Reference	Address	Home Phone Number ()	
	Employment			
	Firm Name or Employer	Address	Business Phone Number ()	
	Position (Owner, Partner, Officer, etc.)	How Long Yrs. Mos.	Type of Business	No. Years in Present Profession
	Previous Firm Name or Employer	Address	How Long Yrs. Mos.	Business Phone Number ()
	Income			
	Monthly Salary	Please submit signed copies of your previous two years income tax returns if you are self-employed, have income based on commissions or have significant income from dividends, interest, partnerships, capital gains or rental property. You are not required to disclose income from alimony, child support or maintenance unless you want us to consider it in connection with your application.		
	Other Income	Source and Address		
	Financial References			
	Bank Accounts, Bank Name and Location		Checking Account No.	Savings Account No.
	Bank Accounts, Bank Name and Location		Checking Account No.	Savings Account No.
	Name and Address of Mortgage Holder or Landlord		Monthly Mortgage Payment/Rent	Real Estate Taxes (if not included in mortgage payment)
	Purchase Price	Present Value	Balance Owning	Rate %
	Home and Vehicle Insurance Agent(s)		Address	Business Phone number ()
	Debit and Credit References			
	List all notes payable, banks, credit cards, dept. stores, etc., itemized. (Attach additional sheet if necessary)			
	Name of Creditor	Account No.	Balance	Mo. Payment
	1			4
	2			5
3			6	
Miscellaneous				
Are you liable for alimony, child support or maintenance payments? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes \$ Per Months				
Do you have any lease obligations? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes \$ Per Months				
Are you an endorsee, guarantor, co-maker? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes Describe:				
Have you ever been a subject of a bankruptcy proceeding or are there any unsatisfied judgments against you? If Yes, Describe:				

Assets and Liabilities					
Provide the information below about yourself, include information about joint application or other person only if you are either relying on that person's income or you are applying for joint credit.					
Assets	Amount	Liabilities	Acct. Number	Amount Owed	Mo. Payments
Cash (identify) 1.		Notes payable to First National:			
2.		Notes payable to Banks:			
Notes Receivable:		Secured:			
Stocks and Bonds:		Unsecured:			
		Accounts/Bills Payable:			
Cash Value in Life Insurance:		Real Estate Indebtedness:			
Automobile (year and make) 1.					
2.					
3.		Other Liabilities, Itemized:			
Retirement Account(s) 1.		1. (Auto Loan)			
2.		2.			
Real Estate (Residence(s)) 1.		3.			
2.		4.			
Other Assets 1.		5.			
2.		Total Liabilities			
Total Assets		Net Worth (Total assets minus total liabilities)			

CO-APPLICANT INFORMATION (IF ANY)	Personal Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated					
	Name (Last) (First) (Initial)		Social Security Number		Date of Birth Age	
	Address			Drivers License Number		Home Phone Number ()
	City, State, Zip			How Long Yrs. Mos.		Relationship to Applicant
	Previous Address (if less than 5 years at present address)					How Long Yrs. Mos.
	Employment					
	Firm Name or Employer			Address		Business Phone Number ()
	Position	Monthly Salary	How Long Yrs. Mos.		Type of Business	No. Years in Present Profession
	Previous Firm Name or Employer			Address		How Long Yrs. Mos. ()

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 loan is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.

APPLICANT'S SIGNATURE _____ DATE _____ CO-APPLICANT/GUARANTOR/ENDORSER SIGNATURE (Where Applicable) _____ DATE _____

X _____

X _____