

# CONSUMER LOAN APPLICATION



Phone: (785) 295-2100

Purpose:

Fax: (785) 290-0460

<b>Vehicle Information</b>	Year:	Make:	Model:	Miles:
	Vehicle Identification Number:			Amount Requested \$
	Insurance Information:			
	Disbursement of Funds to:			

\* We intend to apply for joint credit \_\_\_\_\_ (applicant initial) \_\_\_\_\_ (co-applicant initial)

<b>Applicant</b>	Last Name:	First Name:	M:	DOB:	SSN: - - -	
	Address:		City:	St.	Zip:	
	How long at this address?	If less than 2 years include previous address below.		Home Phone: ( )	Cell Phone: ( )	
	Previous Address:		City:	St.	Zip:	
	Employer:		Email Address:			
	Occupation:	How Long?	if less than 2 yrs fill in previous employer		Work Phone: ( )	
	Previous Employer:	How Long?			Work Phone: ( )	

<b>Joint Applicant</b>	Last Name:	First Name:	M:	DOB:	SSN: - - -	
	Address:		City:	St.	Zip:	
	Relationship to Applicant:	Time at residence	Home Phone: ( )		Cell Phone: ( )	
	Employer:		Email Address:			
	Occupation:	How Long?			Work Phone: ( )	
	Previous Employer:	How Long?			Work Phone: ( )	

<b>Income and Debts</b>	Applicant Gross monthly Salary: \$	Joint applicant Gross Monthly Salary: \$
	*Other Monthly Income: \$	*Other Monthly Income: \$
	Source Other Income: \$	Source Other Income: \$
	Mortgage/Rent Payment: \$	Mortgage/Rent Payment: \$
	Auto Payment: \$	Auto Payment: \$
	Child Support/Alimony, etc.: \$	Child Support/Alimony, etc.: \$

<b>Personnel References</b>	References/Family or Friends not living in the same household			
	Name:	Phone :	Relationship:	
	Address:	City:	St.	Zip:
	Name:	Phone :	Relationship:	
Address:	City:	St.	Zip:	

\*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.

**MARITAL STATUS (Do not complete if this is an application for individual unsecured credit.)**

- Applicant:  Married  Separated  Unmarried (including single, divorced and widowed)
- Other Party:  Married  Separated  Unmarried (including single, divorced and widowed)

The individual or individuals signing this Application, also referred to as "you" and "your" even if an individual, submits the Application to FIDELITY STATE BANK, and agree it shall remain the property of the Bank.

By signing below, I hereby authorize the Bank to obtain, without advance notice, any information which it deems necessary for approval, including requesting credit reports, verifying bank references and employment, and responding to credit inquiries. I understand that additional information may be required and that all loans are subject to credit approval.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Joint Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_