

## NEVADA BANK & TRUST CONSUMER LOAN APPLICATION

TYPE OF APPLICATION							
<input type="checkbox"/> Application for INDIVIDUAL CREDIT <input type="checkbox"/> Application for JOINT CREDIT: We intend to apply for joint credit. _____ (initials) If you live in Nevada, or this is a joint application, check one of the following: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried  AMOUNT OF REQUEST: \$ _____ Preferred Payment Date: _____  Automatic Payment: <input type="checkbox"/> Yes <input type="checkbox"/> No from NB&T Account Number: _____							
<b>NOTICE:</b> If you are married, you can still apply for a separate account in your own name. If you are married and reside in a community property state, the assets of your marital community may be liable on this account even if you apply for an individual account and this application is not signed by your spouse (unless you attached a signed statement that you wish to apply for a separate account based solely on your separate assets).							
PURPOSE OF LOAN: (How will you spend the proceeds?)				<input type="checkbox"/> SECURED (COLLATERAL) <input type="checkbox"/> UNSECURED (NO COLLATERAL)			
COLLATERAL							
TYPE OF COLLATERAL: (If application is SECURED with COLLATERAL)							
DESCRIPTION OF COLLATERAL:							
Year:	Make:	Model:	Purchase Price: \$	Down Payment: \$			
INFORMATION REGARDING APPLICANT							
FIRST NAME	MIDDLE INITIAL	LAST NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER		HOME PHONE NUMBER	
STREET ADDRESS (Required)			CITY	STATE	ZIP CODE	EMAIL ADDRESS	
MAILING ADDRESS (If Different from Street Address)			CITY	STATE	ZIP CODE	TIME AT THIS ADDRESS? YRS.      MOS.	
PREVIOUS ADDRESS (If Less than 3 Yrs. At Current Address)			CITY	STATE	ZIP CODE	DRIVER'S LICENSE NUMBER	
DO YOU? <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER:			MONTHLY MORTGAGE OR RENT PAYMENT \$		ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO		
PRESENT EMPLOYER			OCCUPATION	WORK PHONE & EXT.		TIME EMPLOYED YRS.      MOS.	
EMPLOYER'S ADDRESS			CITY	STATE	ZIP CODE	GROSS MONTHLY INCOME \$	
FORMER EMPLOYER (If less than 3 years)						TIME EMPLOYED YRS.      MOS.	
OTHER INCOME: Alimony, child support or separate maintenance income need not be revealed unless you wish to use it as a basis for repaying this obligation.			SOURCE OF INCOME			AMOUNT \$	
PERSONAL REFERENCE							
NAME OF NEAREST RELATIVE		STREET ADDRESS, CITY, STATE			RELATIONSHIP	HOME PHONE NUMBER	
INFORMATION REGARDING CO-APPLICANT							
FIRST NAME	MIDDLE INITIAL	LAST NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER		HOME PHONE NUMBER	
STREET ADDRESS (Required)			CITY	STATE	ZIP CODE	EMAIL ADDRESS	
MAILING ADDRESS (If Different from Street Address)			CITY	STATE	ZIP CODE	TIME AT THIS ADDRESS? YRS.      MOS.	
PREVIOUS ADDRESS (If Less than 3 Yrs. At Current Address)			CITY	STATE	ZIP CODE	DRIVER'S LICENSE NUMBER	
DO YOU? <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER:			MONTHLY MORTGAGE OR RENT PAYMENT \$		ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO		
PRESENT EMPLOYER			OCCUPATION	WORK PHONE & EXT.		TIME EMPLOYED YRS.      MOS.	
EMPLOYER'S ADDRESS			CITY	STATE	ZIP CODE	GROSS MONTHLY INCOME \$	
FORMER EMPLOYER (If less than 3 years)						TIME EMPLOYED YRS.      MOS.	
OTHER INCOME: Alimony, child support or separate maintenance income need not be revealed unless you wish to use it as a basis for repaying this obligation.			SOURCE OF INCOME			AMOUNT \$	
PERSONAL REFERENCE							
NAME OF NEAREST RELATIVE		STREET ADDRESS, CITY, STATE			RELATIONSHIP	HOME PHONE NUMBER	

## PERSONAL FINANCIAL STATEMENT

ASSETS	Value (Omit Cents)	LIABILITIES	Balance (Omit Cents)	Mo. Payments (Omit Cents)
Cash in Nevada Bank & Trust	\$	Credit Cards/Other	\$	\$ <input type="checkbox"/>
Cash in Other Banks	\$		\$	\$ <input type="checkbox"/>
Stocks/Bonds/Mutual Funds	\$		\$	\$ <input type="checkbox"/>
Pension/Retirement Funds (IRA, 401k, etc)	\$		\$	\$ <input type="checkbox"/>
Real Estate (List total value from below)	\$	Real Estate (List total from below)	\$	\$ <input type="checkbox"/>
Vehicles/Boats/RVs (List Year, Make & Model)	\$	Vehicles/Boats/RV Loans	\$	\$ <input type="checkbox"/>
	\$		\$	\$ <input type="checkbox"/>
	\$		\$	\$ <input type="checkbox"/>
	\$		\$	\$ <input type="checkbox"/>
	\$		\$	\$ <input type="checkbox"/>
	\$		\$	\$ <input type="checkbox"/>
Personal Property	\$	Rent (Landlord Name)		\$
<b>TOTAL THAT I OWN (TOTAL ASSETS)</b>	\$	Child Support/Alimony		\$
(IF DEBTS WILL BE PAID OFF FROM THE PROCEEDS OF THIS LOAN REQUEST, INDICATE WITH AN 'X' IN THE BOX TO THE RIGHT OF THE MONTHLY PAYMENT AMOUNT)		<b>TOTAL THAT I OWE (TOTAL LIABILITIES)</b>	\$	\$
		TOTAL ASSETS LESS TOTAL LIABILITIES	\$	

DESCRIPTION OF REAL ESTATE OWNED							
DESCRIPTION	MORTGAGE HOLDER	PURCHASE DATE	PURCHASE PRICE	CURRENT VALUE	CURRENT BALANCE	RENTAL INCOME	MONTHLY PAYMENT
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
			\$	\$	\$	\$	\$
<input type="checkbox"/> (See Attached if more lines are needed)			<b>TOTALS</b>	\$	\$	\$	\$

INSURANCE INFORMATION		
AGENT NAME	MAILING ADDRESS	PHONE NUMBER
INSURANCE COMPANY NAME		POLICY NUMBER

I/We certify that the information presented here, including any provided tax returns or separate financial statements, is/are accurate and complete. I/We understand that Nevada Bank & Trust will rely on this information in order to service my/our credit application. I/We authorize Nevada Bank & Trust to request any information that is deemed necessary to assess this application or to service my/our credit file in the future. I/we authorize any third party to release information (including but not limited to verification of income and employment, credit history, loan or credit balance, account balance, tax returns, or any other information) to Nevada Bank & Trust at their request, now or in the future.

By: \_\_\_\_\_ Date: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Branch Use – Date Stamp