

# CONSUMER LOAN APPLICATION

## RAYMOND FEDERAL BANK

202 DURYEA STREET  
P.O. BOX 271  
RAYMOND, WA 98577

Account Number \_\_\_\_\_  
Date \_\_\_\_\_

### LOAN REQUEST

PURPOSE OF LOAN

AMOUNT REQUESTED \$

MONTHS NEEDED

### PERSONAL INFORMATION

This application is designed to be completed by the applicant(s) with the lender's assistance. The Co-Applicant section and all other Co-Applicant questions should be completed to the extent possible if: (1) co-applicant will be jointly obligated with you on the loan; (2) you will be relying on income or assets of the co-applicant as a basis for repayment of the loan; (3) you are relying on income from alimony, child support or separate maintenance from the co-applicant or other party; or (4) you are married to the co-applicant and reside in, or the property is located in, a community property State. If you are married, your spouse need not be jointly obligated with you on the loan and need not sign as a co-applicant unless item (2) above applies or unless the spouse's signature is required under state law to create a valid lien, pass clear title or waive inchoate rights to property.

APPLICANT					CO-APPLICANT OR OTHER PARTY				
FULL NAME			DATE OF BIRTH		FULL NAME			DATE OF BIRTH	
PRESENT ADDRESS - <input type="checkbox"/> Own <input type="checkbox"/> Rent Years Phone					PRESENT ADDRESS - <input type="checkbox"/> Own <input type="checkbox"/> Rent Years Phone				
PREVIOUS ADDRESS (complete if less than 2 years at present address)					PREVIOUS ADDRESS (Complete if less than 2 years at present address)				
MARITAL STATUS		DEPENDENTS			MARITAL STATUS		DEPENDENTS		
<small>COMPLETE FOR SECURED LOANS ONLY</small> <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried - (Includes Single, Divorced or Widowed)		Do Not Include Co-Applicant			<small>COMPLETE FOR SECURED LOANS ONLY</small> <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried - (Includes Single, Divorced or Widowed)		Do Not Include Applicant or Dependents Listed by Applicant		
		NO.	AGES				NO.	AGES	
SOCIAL SECURITY NO.					SOCIAL SECURITY NO.				
NAME AND ADDRESS OF EMPLOYER - How Long Phone					NAME AND ADDRESS OF EMPLOYER - How Long Phone				
Type of Business Position/Title					Type of Business Position/Title				
PREVIOUS EMPLOYER - How Long (Complete if current job held less than two years)					PREVIOUS EMPLOYER - How Long (Complete if current job held less than two years)				
Type of Business Position/Title					Type of Business Position/Title				
Are there any unsatisfied judgements against you? Yes <input type="checkbox"/> No <input type="checkbox"/>					Are there any unsatisfied judgements against you? Yes <input type="checkbox"/> No <input type="checkbox"/>				
In the last 7 years, have you been declared bankrupt? Yes <input type="checkbox"/> No <input type="checkbox"/>					In the last 7 years, have you been declared bankrupt? Yes <input type="checkbox"/> No <input type="checkbox"/>				

**IF SELF EMPLOYED, PLEASE SUBMIT BALANCE SHEET, PROFIT AND LOSS STATEMENT, AND COPY OF LATEST FEDERAL TAX RETURN**

ASSETS					INCOME				
DEPOSITS IN CHECKING & SAVINGS ACCOUNTS					INCOME REMARKS-Note: Income from Alimony, Child Support or Maintenance Payments need not be disclosed unless their consideration is desired.				
Name of Institution	Type	Account No.	Applicant	Co-Applicant	HR-Hourly: WK-Weekly	↓	Applicant	Co-Applicant	Office Use
					MO-Monthly: A-Annually				
Vehicles - List Make	Year	Fully Paid			Base Earnings <input type="checkbox"/> Gross <input type="checkbox"/> Net				
1)		<input type="checkbox"/> Yes <input type="checkbox"/> No			Overtime				
2)		<input type="checkbox"/> Yes <input type="checkbox"/> No			Other-Optional-See Remarks				
Real Estate Owned/Other									
TOTAL ASSETS					TOTAL INCOME				

### LIABILITIES - OBLIGATIONS - REFERENCES

**NOTE:** LIST ALL PERSONAL, TRUST, PARTNERSHIP, OR CORPORATE DEBTS. IF RECENTLY PAID OFF, LIST FOR CREDIT REFERENCE. INCLUDE DEBTS FOR 1ST AND 2ND LIEN LOANS (MORTGAGE OR TRUST DEED), AUTOS, APPLIANCES, FURNITURE, PERSONAL LOANS AND NOTES, CO-SIGNED NOTES, ALIMONY, SUPPORT PAYMENTS, AND CHARGE ACCOUNTS.

PURPOSE & DATE OPENED	(A)-Applicant, (CA)-Co-Applicant: (JT)-Jointly	OWNED TO (NAME & ADDRESS)	OFFICE USE	ACCOUNT NUMBER	MONTHLY PAYMENT	BALANCE OWED	PAY OUT OF LOAN
			VERIFICATION REQUESTED <input checked="" type="checkbox"/>				
			<input type="checkbox"/>		\$	\$	<input type="checkbox"/>
			<input type="checkbox"/>		\$	\$	<input type="checkbox"/>
			<input type="checkbox"/>		\$	\$	<input type="checkbox"/>
			<input type="checkbox"/>		\$	\$	<input type="checkbox"/>
1) ATTACH ADDITIONAL LIST IF MORE SPACE NEEDED. 2) IF ANY OBLIGATION IS PAST DUE - ATTACH LETTER OF EXPLANATION.				TOTAL LIABILITIES	\$	\$	

### PERSONAL REFERENCES

Name	Relationship	Address	City	State	Phone No.
Nearest Relative Not Living With You					
Personal Reference					

### AGREEMENT

The undersigned hereby declare and represent that they have read the foregoing Application, that all statements made therein are complete and true to their knowledge. That all financial and credit information of value to the consideration of this Loan Request has been given and that the statements are made and information given as an inducement to the Lender to grant the Loan for which this Application is made. The Applicant(s) authorize the Lender, or his Agent, to verify the information contained herein and to make such additional normal inquiries as reasonably may be related to or associated with this Application, from credit bureaus and from employers, creditors, and references listed on this Application, and agree that such information, along with the Application shall remain the Lender's property. The undersigned understand that the selection of a dealer or contractor is their responsibility and that this financial institution in no way guarantees equipment, materials or workmanship and that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of above facts, as applicable under the provisions of Title 1B, United States Code, Section 1014.

Signed \_\_\_\_\_ Signed \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_