

Credit Request

Type of Loan Request: <input type="checkbox"/> Home Equity Line of Credit <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Vehicle Loan <input type="checkbox"/> Certificate Secured Loan # _____ <input type="checkbox"/> Other	Type of Credit Requested: <input type="checkbox"/> Joint Credit <input type="checkbox"/> Individual Credit—relying solely on my income and assets <input type="checkbox"/> Individual Credit – relying solely on my income and assets as well as assets of another	Loan Purpose	
		Loan Amount	
		Loan Term	

Applicant(s) Information

Applicant Information		Co-Applicant Information	
Full Name			
Social Security Number			
Date of Birth			
Drivers License Number/ST			
Telephone Number			
Email Address			
Marital Status	<input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated	
Present Address			
City, ST Zip			
Address Status	<input type="checkbox"/> Rent <input type="checkbox"/> Own	<input type="checkbox"/> Rent <input type="checkbox"/> Own	
How Long at Current Address			
Current Employer			
Employer Telephone			
Years on Job			
Monthly Gross Income			
Previous employer (if less than 2 years at current)			
Dates Worked			
Self Employed	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
*Alimony, child support, or other income need not be revealed if you do not wish it to be considered a basis for repaying this loan.			
*Other Income Source			
*Other Income Monthly Amount			

Complete this section for Vehicle, Boat or Other Loan Request

Year	
Make	
Model	
VIN	
Mileage	

Complete this section for Home Equity Loan or Home Equity Line of Credit Request

Property Address	
County of Property	
Estimated Property Value	
Mortgage Holder	
Mortgage Balance	
Current Monthly Payment	
Monthly Payment includes Property Taxes	<input type="checkbox"/> Yes <input type="checkbox"/> No Annual Taxes Amount
Monthly Payment includes Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No Annual Insurance Amount
Second Mortgage Holder	
Second Mortgage Balance	

Complete this section for All Loan Requests

Insurance Company	
Agent Name	
Agent Telephone	

Completed application can be dropped off at any Citizens location, faxed to 219-933-0211 or mailed to: Citizens Financial Bank, Attn: Client Services, 5311 Hohman Ave, Hammond, IN 46320

Assets	Bank Held At	Current Value	Held Individual or Joint	
Primary Checking			<input type="checkbox"/>	<input type="checkbox"/>
Secondary Checking			<input type="checkbox"/>	<input type="checkbox"/>
Primary Savings			<input type="checkbox"/>	<input type="checkbox"/>
Marketable Securities – Stocks / Bonds / Mutual Funds / etc.			<input type="checkbox"/>	<input type="checkbox"/>
Personal Residence:			<input type="checkbox"/>	<input type="checkbox"/>
Additional Real Estate Owned			<input type="checkbox"/>	<input type="checkbox"/>
401k or Employer Retirement Accounts			<input type="checkbox"/>	<input type="checkbox"/>
IRA/KEOGH Accounts			<input type="checkbox"/>	<input type="checkbox"/>
Automobile Year / Make / Model:			<input type="checkbox"/>	<input type="checkbox"/>
Automobile Year / Make / Model:			<input type="checkbox"/>	<input type="checkbox"/>
Business Interest			<input type="checkbox"/>	<input type="checkbox"/>
Other Assets			<input type="checkbox"/>	<input type="checkbox"/>
TOTAL ASSETS:				

Liabilities	Bank Held At	Current Balance	Monthly Payment	Current Rate	Held Individual or Joint	
Auto loan					<input type="checkbox"/>	<input type="checkbox"/>
Auto loan					<input type="checkbox"/>	<input type="checkbox"/>
Residential Mortgage–Primary Residence					<input type="checkbox"/>	<input type="checkbox"/>
Residential Mortgage–Non-Primary Residence					<input type="checkbox"/>	<input type="checkbox"/>
Home Equity Term or Line of Credit					<input type="checkbox"/>	<input type="checkbox"/>
Credit Card					<input type="checkbox"/>	<input type="checkbox"/>
Credit Card					<input type="checkbox"/>	<input type="checkbox"/>
Credit Card					<input type="checkbox"/>	<input type="checkbox"/>
Other Loans or Lines of Credit					<input type="checkbox"/>	<input type="checkbox"/>
TOTAL LIABILITIES:						

The individual(s) listed above authorize Citizens Financial Bank (Citizens) to obtain a consumer credit report for use in assessing his/her personal creditworthiness in connection with this application. The undersigned acknowledges that by submitting this form to Citizens they are applying for a loan with Citizens. The information provided in this application is true and correct as of the date set forth opposite my signature. Individual(s) understand the approval process may include an inquiry into their credit history and past banking relationships. Additional information may be required to properly evaluate this credit request. The USA Patriot Act requires that we verify the identity of all account holders. We may ask you or your co-applicant to show proof of your identity. Citizens reserves the right to deny this application based on all information received.

If Citizens obtains information from a consumer-reporting agency as part of our consideration of your application, its name, address, and toll-free number will be disclosed with the credit decision. The reporting agency played no part in our decision and is unable to supply specific reasons why we have denied credit to you. You have a right under the Fair Credit Reporting Act to know the information obtained in your credit file at the consumer-reporting agency. You also have a right to receive a free copy of your report from the credit-reporting agency, if you request it no later than 60 days after you are notified of the action taken. In addition, if you find that any information contained in the report you receive is inaccurate or incomplete, you have the right to dispute the matter with the credit-reporting agency.

If your application for this loan is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Citizens at 888-226-5237 or by mail at Citizens Financial Bank, Attention Loan Operations, 5311 Hohman Ave, Hammond IN 46320 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for denial within 30 days of receiving your request for the statement.

Signature of Applicant: _____ Date Signed: _____

Signature of Co-Applicant: _____ Date Signed: _____

Equal Credit Opportunity Act Monitoring

The following information is requested by the Bank to monitor our compliance with the Equal Credit Opportunity Act (ECOA) and will not be used in making a credit decision. You are not required to furnish this information, but are encouraged to do so. You may select one or more designates for "Race." The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, the lender will note ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to furnish this information, please check below.

APPLICANT: <input type="checkbox"/> I do not wish to furnish this information		CO-APPLICANT: <input type="checkbox"/> I do not wish to furnish this information	
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non Hispanic or Latino	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non Hispanic or Latino	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male
Race: <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> American Indian <input type="checkbox"/> Black or African American	<input type="checkbox"/> Asian <input type="checkbox"/> White	Race: <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> American Indian <input type="checkbox"/> Black or African American	<input type="checkbox"/> Asian <input type="checkbox"/> White

