Consumer Loan Application

Important Information About Procedures For Opening A New account: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.



EMAIL ONLY IF SENT SECURELY

Co-Applicant Initials

I am applying for individual credit.We are applying for joint credit.

Applicant Initials

What this means to you:

When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see

your driver's license or ic	dentifying documents.									
Amount Requested					Term Mo/Yr		Payment D	Date Requested		
Purpose					Collateral			Value		
					I					
First Name	Middle Name	Last Name		Jr./Sr.	First Name	Middle Name	Last Name		Jr./Sr.	
Are you a member of the armed	l forces who is serving on act	ive duty or on active Guard or Re	serve duty?	No Yes	Are you a member of the	e armed forces who is serving on	active duty or on active Guard o	r Reserve duty?	No	Yes
Are you a dependent of the arm	ned forces who is serving on	active duty or on active Guard or	Reserve duty?	No Yes	Are you a dependent of	f the armed forces who is serving o	on active duty or on active Guard	d or Reserve duty?	No	Yes
Mailing address		Email address			Mailing address		Email address			
City		State	Zip		City		State	Zip		
Physical address □Own □	Rent	Time at address (yy/mm)			Physical address □Ow	vn □Rent	Time at address (yy/mm)			
City		State	Zip		City		State	Zip		
Former Address (If Less Than 2 Yea	ars At Current Address)	Time at address (yy/mm)			Former Address (If Less Th	an 2 Years At Current Address)	Time at address (yy/mm)			
City		State	Zip		City		State	Zip		
Social Security No.		Home Phone/Cell Number			Social Security No.		Home Phone/Cell Number			
Date Of Birth	Drivers License #			DL State	Date Of Birth	Drivers License #		DL	L State	
	APPLICANT'S	S OCCUPATION				CO-APPLICA	NT'S OCCUPATIO	N		
			years of incor	me tax returns if	self-employed or two	years of W-2's if seasonally e		,		
Employer					Employer					
Address		Work phone number			Address		Work phone number			
How long Years I	Months	Position			How long Years	Months	Position			
Former employer/position		How long Years	Months		Former employer/position	1	How long Years	Months		
	APPLICA	NT'S INCOME				CO-APPLIC	ANT'S INCOME			
List sou			support pay	ments need not	be revealed if you do n	not wish to have it considered		s obligation		
Gross monthly salary					Gross monthly salary					
Bonus and commissions					Bonus and commissions					
Net rental income					Net rental income					
Monthly dividend income					Monthly dividend income	e				
Other					Other					
Other					Other					
MONTHLY TOTAL			\$		MONTHLY TOT	ΓAL		\$		

REAL ESTATE OWNED													
NOTE: Attach additional sheets if necessary. Indicate in whose name the account is held. Description Purchase Date			Mortgage Holder			er	Current Value	Curren	t Balance Net Rental Income		Monthly Payment		
				د د. ا	,								
FINANCIAL STATEMENT													
Assets		Current Value				Monthly Payment		Monthly Payment	Balance				
Checking Account Balance			Mor			je payment							
Savings Account Balance						Credit card (list)							
Market value of stocks/bonds													
Real Estate (see real estate owned)						Other real estate loans	;						
Automobile yr model						Auto Ioan							
make Automobile yr model						Auto loan							
make Boat/recreational vehicle yr make						Alimony/child support							
Profit sharing/retirement						Other debt							
Personal property													
Other assets (describe)													
TOTAL			\$ MONTH			MONTHLY TO	LY TOTAL				\$		
APPLICANT—ADDI	TIONAL INF	ORMATI	ION			C0-	CO-APPLICANT—ADDITI			ONAL INFORMATION			
Are you a co-signer, endorser, or guarantor I on any loan or contract?	f "YES" for whom?					Are you a co-signer, endorser, or guarantor If "YES" for w on any loan or contract?				whom?			
YES NO	fo whom owed?					YES □ N0 □	To whom owed?						
								_					
l authorize Vintage Bank Ka	nsas to auton	natically de	educt the j	payment fro	omn	ny VBK account	t number						
I am (we are) submitting an application to Vintage Bank Kansas for a consumer loan. Everything I (we) have stated in this application is correct to the best of my (our) knowledge. I (we) understand that you will retain this application whether or not it is approved. You are authorized to check my (our) credit and employment history and to answer questions about your credit experience with me (us). I (we) understand that upon approval of this loan application, additional personal and financial information, as well as information regarding any collateral offered, may be required prior to disbursement of loan proceeds. I am (we are) responsible for any third party costs that may be incurred in the processing and closing of the credit request.													
Applicant's Signature Date			ate	Co-Applicant's Signatur			e Date						
FOR BANK USE ONLY													
Date application received	Branch			Address verified						Prior to loan decision, include			
Rel. Mgr. & NMLS #	 	Special terms					By Email By Phone By Mail By Fax		Government Monitoring Information Addendum if subject Ioan is a 1st Lien secured by principal residence (including mobile home) for purchase or refinance				