CONSUMER LOAN APPLICATION

| Credit Requested Is: Home Equity Loan | Collateral Secure | ed Loan | nal Unsecured Loan | | Account Requested: | Individual | Joint | |
|---|--|-------------------------|--|---------------------|-----------------------------|---------------------|---------------------|--|
| Amount Requested Description of Collateral Offe | We intend to apply for joint credit | | | | | | | |
| \$ Purpose of Credit Request | Applicant | Initial _ | Co-Applicant | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| If the Applicant is married, he or she may apply for individual or c) you are relying on property in a community property stat | e as a basis for re | epayment of the credit | t requested. | | - | unity property sta | te; | |
| Applicant | A | PPLICANT IN | NFORMATIO | N | Co-Applicant | | | |
| Applicant Role: Guarantor Guarantor | | | Applicant Role: Borrower Co-Signer Guarantor | | | | | |
| Applicant Name (include Jr. or Sr. if applicable) Co-Applicant Name (include Jr. or Sr. if applicable) | | | | | . if applicable) | | | |
| Social Security Number Home Phone (incl. are | umber Home Phone (incl. area code) DOI | | Social Security Number Home Phone (incl. area code) | | | code) DOB (r | nm-dd-yyyy) | |
| Email Address | | | Email Address | | | | | |
| Married Dependents (not listed by Co-Applicant) | | | Dependents (not listed by Applicant) | | | | | |
| | o. ages | | Separated Single, divorced, w | | | | | |
| Citizenship: U.S. Citizen Permanent Residen Present Address (street, city, state, ZIP) since | t Alien 🔟 N | on-Resident Alien | Citizenship: Present Address (str | U.S. Citizen | Permanent Resident A | lien 🛄 Non | Resident Alien | |
| | | | | cet, city, state, z | | | | |
| Mailing Address, if different from Present Address Mailing Address, if different from Present Address | | | | | | | | |
| | Ç , | ent address for less th | | | | | | |
| Former Address (street, city, state, ZIP) from | to | | Former Address (str | eet, city, state, 2 | IP) from | to | | |
| Applicant | EMPLO | YMENT / INC | OME INFORI | MATION | Co-Applicant | | | |
| Name & Address of Employer | f Employed | Yrs. on this job | Name & Address of | Employer | Se | lf Employed | Yrs. on this job | |
| | | Full time | | | | | Full time | |
| Position/Title & Type of Business Business P | | e (incl. area code) | Position/Title & Type of Business Business Phone (in | | | e (incl. area code) | | |
| Gross Monthly Income \$ | | | Gross Monthly Income \$ | | | | | |
| Name & Address of Employer | f Employed | Dates | Name & Address of | Employer | Se | If Employed | Dates | |
| | | from | | | | | from | |
| | | to | | | | | to | |
| osition/Title & Type of Business Business Pho | | e (incl. area code) | Position/Title & Type of Business | | | Business Phon | e (incl. area code) | |
| Name & Address of Employer | | Dates | Name & Address of Employer | | If Employed | Dates | | |
| | | from | | | | | from | |
| | | to | | | | | to | |
| Position/Title & Type of Business | Business Phone | e (incl. area code) | Position/Title & Typ | e of Business | | Business Phon | e (incl. area code) | |
| NOTICE: Alimony, Child Support or Separate Maintenance Incor | ne need not be re | vealed if you do not w | vish to have it conside | ered as a basis fo | r repaying this obligation. | 1 | | |
| ther Income | | | Other Income | \$ | | | | |
| Other Income | | | Other Income | | | | | |
| Other Income \$ | | • | | | | | | |
| | | HOUSING IN | | Т | | Т | | |
| Own Rent since | | Monthly Housing/F \$ | | Present Value \$ |) | Date Purchase | d | |
| | C/ | ASH ASSET I | NFORMATIC |)N | | Т | | |
| Financial Institution Name | | | | Saving Accou \$ | unt Balance | Checking Acc \$ | ount Balance | |
| APPLICANT SIGNATURE(S) | | | | | | | | |

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand and agree that Lender may obtain, use and share my state and federal tax return information for purposes of: 1) reviewing and responding to this loan application; 2) originating the loan; 3) servicing the loan; 4) selling or transferring all or a part of the loan or any interest in it; and (5) internal marketing analysis, marketing to me/us, and other marketing as permitted by law. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations, tax return information consent, and authorizations extend not only to Lender, but also to Third Parties, including loan servicers, any insurer of the loan, government agency loan guarantors, marketing companies, and to any investor to whom Lender may sell all or any part of the loan, as well as to the affiliates, agents, and any successors and assigns of Lender and Third Parties. I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

Applicant

ASSETS AND LIABILITIES ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant:

Application Number:

| A | ssets | Liabilities | | | | |
|--|----------------------|--|--------------|--------------|--|--|
| Checking and Savings Accounts | | Name and Address of Creditor | | | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | |
| | | | | | | |
| | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | ₽ Payment | Balance | | |
| | | | 1 dymond | Dalanoo | | |
| | | | | | | |
| | | | | | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | |
| Name & Address of Institution | Cash or Market Value | Name & Address of Company | Payment | Balance | | |
| | | | | | | |
| | | | | | | |
| | | | 1 | - | | |
| Acct. No. | \$ | Acct. No. | \$ | \$ | | |
| Stocks and Bonds Assets | | Name & Address of Company | Payment | Balance | | |
| Number Description | Cash or Market Value | | | | | |
| | \$ | | | | | |
| | \$ | | | | | |
| | \$ | Acct. No. | \$ | \$ | | |
| | \$ | Name & Address of Company | Payment | Balance | | |
| Life Insurance - Face Value | \$ | | | | | |
| Real Estate Owned Assets | \$ | | | | | |
| Vested Interest in Retirement Funds Net Worth of Business Owned | \$ | Acct. No. | \$ | \$ | | |
| Automobiles Owned: | 4 | Name & Address of Company | | ↓ Balance | | |
| Year Make and Model | Cash or Market Value | | rayment | Dalance | | |
| | \$ | | | | | |
| | \$ | | | | | |
| | \$ | Acct. No. | \$ | \$ | | |
| | \$ | Name & Address of Company | Payment | Balance | | |
| Other Assets Owned: | | | | | | |
| Description | Cash or Market Value | | | | | |
| | \$ | | | - | | |
| | \$ | Acct. No. | \$ | \$ | | |
| | \$ | Alimony/Child Support/Separate Maintenance Owed to | \$ | | | |
| | \$ | | | | | |
| | \$ | Job Related Expense | \$ | | | |
| | \$ | | | | | |
| LIQUID ASSETS | \$ | TOTAL MONTHLY PAYMENTS \$ | | | | |
| TOTAL ASSETS | \$ | TOTAL LIABILITIES | \$ | | | |
| NET WORTH | \$ | | | | | |

"*" indicates obligations satisfied at or before loan closing.

| INTERVIEWER INFORMATION | | | | | | |
|--|-------------------------------------|------|--|--|--|--|
| Originator Name | Phone Number | Ext. | | | | |
| Originator NMLSR Identifier | Originator License State and Number | | | | | |
| Company Name | | | | | | |
| Company NMLSR Identifier | Company License State and Number | | | | | |
| Company Address (street, city, state, ZIP) | | | | | | |

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