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. What this means for 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 other identifying documents. What type of credit are you requesting? (Please check appropriate box:) TO: Name/Address of Lender SECURED UNSECURED OPEN-END LINE OF CREDIT First Community Bank and Trust 1111 Dixie Highway, PO Box 457 INDIVIDUAL (Own income or assets) INDIVIDUAL (Own income or assets plus income or assets from other sources) Beecher, IL 60401 JOINT (please initial) COSIGNER Phone: (708) 946-2246 Fax: (708) 546-2615 Loan Amount Interest Rate Payment Purpose LOAN ORIGINATION COMPANY NAME: LOAN ORIGINATION COMPANY IDENTIFIER: LOAN ORIGINATOR NAME: LOAN ORIGINATOR LICENSE NUMBER: APPLICANT/COSIGNER INFORMATION Name (Last) (First) (Suffix) Taxpayer ID Number (SSN/TIN) Date of Birth Street Address Driver's License/ID Number State Home Phone Number City State ZIP Code How Long There No. of Dependents Age of Dependents County Previous Address (if less than 2 years at current address) Employe Phone Number Address How Long Position Weekly Monthly \$ Gross Net How Often Paid Position Previous Employer Address How Long Nearest Relative Not Living With You Relationship ZIP Code Address City State Relative's Phone Number Present Mortgage Holder/Landlord Phone Number Rent Own Monthly Payment \$ Immigration Status Other: U.S. Citizen Perm. Resident of U.S. Marital Status: Do not complete if this application is for individual unsecured credit unless responding party resides in a community property state or is relying on property located in such a state for repayment of the credit requested Separated Unmarried (including single, divorced, and widowed) Frequency Source Alimony, Child Support, Separate Maintenance Payments: You are not required to disclose income from alimony, child support, or separate maintenance payments. However, if you are relying on income from alimony, child support, or separate maintenance payments as a basis for repayment of this obligation, please complete the information below. Written Agreement Payment Received Pursuant to: Court Order Oral Understanding Alimony per Month \$ Child Support per Month \$ Separate Maintenance Payment per Month \$ **CO-APPLICANT INFORMATION** Name (Last) (Suffix) Taxpayer ID Number (SSN/TIN) Street Address Driver's License/ID Number State Home Phone Number ZIP Code How Long There No. of Dependents Age of Dependents City State County Previous Address (if less than 2 years at current address) Phone Number Employer Address Position How Long Gross Net Weekly Monthly \$ How Often Paid Average Monthly Overtime Pay \$ Previous Employe How Long Nearest Relative Not Living With You Relationship City ZIP Code Address State Relative's Phone Number Present Mortgage Holder/Landlord Phone Number Own Immigration Status U.S. Citizen Perm. Resident of U.S. Other: Marital Status: Married Separated Unmarried (including single, divorced, and widowed) Other Income: Amount \$ Frequency Source Alimony, Child Support, Separate Maintenance Payments: You are not required to disclose income from alimony, child support, or separate maintenance payments. However, if you are relying on income from alimony, child support, or separate maintenance payments as a basis for repayment of this obligation, please complete the information below. Written Agreement Payment Received Pursuant to: Court Order Oral Understanding Alimony per Month \$ Child Support per Month \$ Separate Maintenance Payment per Month \$ ADDITIONAL INFORMATION If you, a joint applicant, or other party answers "yes" to any of the following questions, please explain in the space provided. Yes No Are you a guarantor or co-maker of any leases, contracts, or debts? Applicant: Yes No No Joint Applicant/Other Party: No Are there any suits or judgments pending against you? Applicant: Yes Joint Applicant/Other Party: Yes Yes ☐ No Yes Have you been declared bankrupt in the last 10 years? Applicant: Joint Applicant/Other Party: No

COLLATERAL INFORMATION									
Collateral to Secure Account: The description should include make, year, length, loan value, selling price, existing liens, serial numbers, name(s) of titleholder(s), legal description, license or registration numbers, etc., as may be applicable.									
CURRENT ASSETS									
Please attach additional sheet(s) if more space is required for the Current Assets section. DESCRIPTION OF ASSET OWNER NAME(S) SUBJECT TO LIEN: YES/NO VALUE									
Total Assets	s from Addendum								
TOTAL ASS									
OUTSTANDING DEBTS									
The following payments y	ng are all of the loans or debts you present ou are obligated to make. Please attach a	y owe, ind ditional s h	cluding charge accou	ınts, installn is required .	nent contracts, credit ca	ards, rents	s, mortgages, alimon	y, child support, and sep	arate maintenance
	t column (Applicant Code) to indicate wheth	er the deb		of the Appli		(C), or Joir	•••		lo
APPLICANT CODE	NAME OF CREDITOR		ACCOUNT NUMBER		ORIGINAL AMOUNT		CURRENT BALANCE	MONTHLY PAYMENTS	Check box if to be paid from proceeds
	Total Debts from Addendum								
	TOTAL DEBTS								
investigate and verify all information I provided to Lender, its agents, successors, and assigns. I understand that it is my sole and exclusive responsibility to determine all the tax effects of the loan and acknowledge that Lender, its agents, successors, and assigns, have not provided any tax advice to me. Lender, its agents, successors, and assigns, care required to report the amount of interest paid on the loan to the Internal Revenue Service, I understand that Lender, its agents, successors, and assigns, are required to report the amount of interest paid on the loan to the Internal Revenue Service, I understand that Lender, its agents, successors, and assigns, will report using the Social Security Number it incorrect, that I may be subject to Internal Revenue Service penalties. I understand Lender, its agents, successors, and assigns, will keep this application whether or not my credit request is approved. Certification: I certify that the information provided in this application is true and correct as of the date set forth opposite my signature on this application and acknowledge my understanding that any intentional or negligent misrepresentations of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq., and liability for monetary damages to the Lender, its agents, successors, assigns, insurers, and any other person who may suffer any loss due to reliance upon any misrepresentation I made in this application or in any other manner. Signature of Applicant or Cosigner Date MILITARY ANNUAL PERCENTAGE RATE STATEMENT Federal law provides important protections to members of the Armed Forces and their dependents relating to extensions of consumer credit. In general, the cost of consumer credit to a member of the Armed Forces and his or her dependent may not exceed an annual percentage rate of 36 percent. This rate must includ									
Applic	ants may receive this notice verbally by calli	ng LENDEI			LICE ONLY	•			
Loan Appro	val (Indicate Conditions of Loan, if Any)		Cr	REDITOR	USE ONLY				
Date Applic	ation Received Received By							Amount Re	quested
Date Applic	Date Application Completed Approved By Amount Approved								
This application was taken by: Face-to-Face Interview Mail Telephone Internet									
No C Insu Limi Colle Garr Fore Delir Bank Num	eason(s) for Adverse Action Concerning Cre Credit File fficient Number of Credit References Provide ted Credit Experience ted Credit Experience tection Action or Judgment tishment or Attachment closure or Repossession tiquent Credit Obligations (past or present w terruptcy tiber of Recent Inquiries on Credit Bureau Rep ter - Specify: Identification Program (CIP) Record Informationsigner:	d th others) ort		Poor Credi Temporary Insufficien Insufficien Excessive Temporary	ole Type of Credit Reference t Performance With Us or Irregular Employment t Length of Employment t Income for Amount of Obligations in Relation to Residence t Length of Residence	nt Credit Red o Income	Un U	hable to Verify Credit Refeable to Verify Employme hable to Verify Income hable to Verify Residence hable to Verify Residence hable to Type of Collateral hacceptable Appraisal hacceptable Leasehold Estep Do Not Grant Credit to the Terms and Condition	nt Not Sufficient tate Any Applicant
Applicant/Cosigner Information Collected and Verified in Accordance with CIP (initial) Co-Applicant:									



CONSUMER LOAN APPLICATION

In order for First Community Bank and Trust to efficiently evaluate your loan request, please provide the following items, as applicable, with the signed Loan Application:

•	2 recent pay-stubs					
•	Copy of your last W-2					
•	Retirement, Social Security, or Disability Income:					
	2 years tax returns and Award Letters					
•	Purchase:					
	Bill of Sale or complete item description with VIN # or Serial #					
•	Purchase:					
	Insurance agent name and phone number					
•	If you have collateral for the loan:					
	Provide complete collateral description					
•	Copy of your Mortgage Statement:					
	Homeowners who escrow for taxes and insurance					
•	Copy of your Property Insurance with annual premium:					
	Homeowners who do not escrow for taxes and insurance					

If you have any questions, please contact the Consumer Loan Department at (708) 946-2246.



ADDITIONAL REFERENCES

Anyone not living with you

Name:	
Relationship:	
Address:	
Home Phone:	
Cell Phone:	
Work Phone:	
Name:	
Relationship:	
Address:	
Home Phone:	
Cell Phone:	
Work Phone:	
Name:	
Relationship:	
Address:	
Home Phone:	
Cell Phone:	
Work Phone:	