

IMPORTANT APPLICANT INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

Loan Applicant Information:

Legal Name: _____

Tax ID# _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Fax: _____

**Borrower or
Principal's Name:** _____

Tax ID# _____

Position Title: _____

DOB: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Fax: _____

**Borrower or
Principal's Name:** _____

Tax ID# _____

Position Title: _____

DOB: _____

Address: _____

Phone: _____

Cell: _____

Email: _____

Fax: _____

Accountant Name: _____

Phone: _____

Address: _____

Insurance Agent:

Name: _____

Phone: _____

Purpose of Loan: _____

Amount Requested: _____

DATE: _____

NOTICE - JOINT CREDIT

We intend to apply for joint credit. (initials) _____

CREDIT DENIAL NOTICE. If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement, or similar types of business credit in this Commercial Loan Application, and if your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact:

**STATE BANK OF HERSCHER
10 TOBEY DRIVE HERSCHER IL 60941
815 – 426-2156**

within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The notice that follows describes additional protections extended to you.

EQUAL CREDIT OPPORTUNITY NOTICE: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract), because all or a part of the applicant’s income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is:

**FDIC CONSUMER RESPONSE CENTER
2345 GRAND BOULEVARD, SUITE 100
KANSAS CITY MO 64108**

SIGNATURES. By signing below, Loan Applicant submits this application and the information provided on all accompanying financial statements and schedules for the purpose of obtaining credit and represents that the information submitted is accurate and complete. Loan Applicant acknowledges that representations made in this application will be relied on by Lender in evaluating this application and, if approved, in extending credit. Loan Applicant represents that none of the parties named in this application have relied on advice from the Lender in applying for or receiving any credit. Loan Applicant acknowledges that Lender has not made any commitment to approve this application and extend credit, unless otherwise agreed to in writing. Lender is authorized to conduct any inquires it decides are necessary to verify the accuracy of the information contained in this application and to use any reasonable method to determine the creditworthiness of the Loan Applicant. Lender is also authorized to answer any questions from others about Lender’s credit experience with the parties in this application. Loan Applicant will promptly notify Lender of any subsequent changes which would affect the accuracy of this application, and will provide all documents and information that Lender decides are necessary to complete this application. Loan Applicant authorizes Lender to retain this application, whether or not Lender approves any extension of credit. Any intentional misrepresentation of the information contained herein could result in criminal action under federal law.

In addition, each individual signing below authorized the Creditor to check their individual credit account and employment history and have a credit reporting agency prepare a consumer credit report on them.

Applicant Name

By X _____
for Applicant

Title

Date

By X _____
for Applicant

Title

Date