

FORESIGHT BANK CONSUMER LOAN APPLICATION - GOV'T MONITORING

| | | |
|--|-----------------------------------|---|
| Credit Requested Is: <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Collateral Secured Loan <input type="checkbox"/> Personal Unsecured Loan | | Account Requested: <input type="checkbox"/> Individual <input type="checkbox"/> Joint |
| Amount Requested \$ | Description of Collateral Offered | We intend to apply for joint credit Initial _____ |
| Purpose of Credit Request | | Applicant _____ Co-Applicant _____ |

If the Applicant is married, he or she may apply for individual credit. For Marital Status, check one if a) you are applying for a secured credit; b) you reside in a community property state; or c) you are relying on property in a community property state as a basis for repayment of the credit requested.

| Applicant | | APPLICANT INFORMATION | | Co-Applicant | |
|--|------------------------------|--|------------------------|---|------------------|
| Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor | | Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor | | | |
| Applicant Name (include Jr. or Sr. if applicable) | | Co-Applicant Name (include Jr. or Sr. if applicable) | | | |
| Social Security Number | Home Phone (incl. area code) | DOB (mm-dd-yyyy) | Social Security Number | Home Phone (incl. area code) | DOB (mm-dd-yyyy) |
| Email Address | | Email Address | | | |
| <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed) | | Dependents (not listed by Co-Applicant) no. _____ ages _____ | | <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed) | |
| Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien | | Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien | | | |
| Present Address (street, city, state, ZIP) _____ since _____ | | Present Address (street, city, state, ZIP) _____ since _____ | | | |
| Mailing Address, if different from Present Address | | Mailing Address, if different from Present Address | | | |
| If residing at present address for less than two years, complete the following: | | | | | |
| Former Address (street, city, state, ZIP) _____ from _____ to _____ | | Former Address (street, city, state, ZIP) _____ from _____ to _____ | | | |

| Applicant | | EMPLOYMENT / INCOME INFORMATION | | Co-Applicant | |
|---|--|--|--|---|--|
| Name & Address of Employer <input type="checkbox"/> Self Employed | | Yrs. on this job <input type="checkbox"/> Full time | | Name & Address of Employer <input type="checkbox"/> Self Employed | |
| Position/Title & Type of Business | | Business Phone (incl. area code) | | Position/Title & Type of Business | |
| Gross Monthly Income \$ | | Gross Monthly Income \$ | | | |
| Name & Address of Employer <input type="checkbox"/> Self Employed | | Dates from _____ to _____ | | Name & Address of Employer <input type="checkbox"/> Self Employed | |
| Position/Title & Type of Business | | Business Phone (incl. area code) | | Position/Title & Type of Business | |
| Name & Address of Employer <input type="checkbox"/> Self Employed | | Dates from _____ to _____ | | Name & Address of Employer <input type="checkbox"/> Self Employed | |
| Position/Title & Type of Business | | Business Phone (incl. area code) | | Position/Title & Type of Business | |

NOTICE: Alimony, Child Support or Separate Maintenance Income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

| | | | | | |
|--------------|--|----|--------------|--|----|
| Other Income | | \$ | Other Income | | \$ |
| Other Income | | \$ | Other Income | | \$ |
| Other Income | | \$ | Other Income | | \$ |

| HOUSING INFORMATION | | | |
|--|----------------------------|---------------------|----------------|
| <input type="checkbox"/> Own <input type="checkbox"/> Rent since _____ | Monthly Housing/Rent \$ | Present Value \$ | Date Purchased |

| CASH ASSET INFORMATION | | |
|----------------------------|------------------------------|--------------------------------|
| Financial Institution Name | Saving Account Balance \$ | Checking Account 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.

X _____
Applicant Date

X _____
Co-Applicant Date

ASSETS AND LIABILITIES ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant:

Application Number:

| Assets | | | 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 |
| | | | | | |
| 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. | \$ | \$ |
| 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 | | \$ | | | |
| Automobiles Owned: | | | Name & Address of Company | Payment | Balance |
| Year | Make and Model | Cash or Market Value | | | |
| | | \$ | | | |
| | | \$ | | | |
| | | \$ | | | |
| | | \$ | 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.

GOVERNMENT MONITORING / INTERVIEWER INFORMATION ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant:

Application Number:

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race". The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

Applicant:**Ethnicity:** Check one or more

- ☐ Hispanic or Latino
- ☐ Mexican
- ☐ Puerto Rican
- ☐ Cuban
- ☐ Other Hispanic or Latino - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:
-

- ☐ Not Hispanic or Latino
- ☐ I do not wish to provide this information

Race: Check one or more

- ☐ American Indian or Alaskan Native - Print name of enrolled or principal tribe:
-

- ☐ Asian
- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian - Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:
-

- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on:
-

- ☐ White
- ☐ I do not wish to provide this information

Sex:

- ☐ Female
- ☐ Male
- ☐ I do not wish to provide this information

To Be Completed by Financial Institution (for an application taken in person):

Was the ethnicity of the applicant collected on the basis of visual observation or surname?

- ☐ Yes
- ☐ No

Was the race of the applicant collected on the basis of visual observation or surname?

- ☐ Yes
- ☐ No

Was the sex of the Applicant collected on the basis of visual observation or surname?

- ☐ Yes
- ☐ No

Co-Applicant:**Ethnicity:** Check one or more

- ☐ Hispanic or Latino
- ☐ Mexican
- ☐ Puerto Rican
- ☐ Cuban
- ☐ Other Hispanic or Latino - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:
-

- ☐ Not Hispanic or Latino
- ☐ I do not wish to provide this information

Race: Check one or more

- ☐ American Indian or Alaskan Native - Print name of enrolled or principal tribe:
-

- ☐ Asian
- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian - Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:
-

- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on:
-

- ☐ White
- ☐ I do not wish to provide this information

Sex:

- ☐ Female
- ☐ Male
- ☐ I do not wish to provide this information

Was the ethnicity of the co-applicant collected on the basis of visual observation or surname?

- ☐ Yes
- ☐ No

Was the race of the co-applicant collected on the basis of visual observation or surname?

- ☐ Yes
- ☐ No

Was the sex of the co-Applicant collected on the basis of visual observation or surname?

- ☐ Yes
- ☐ No

TO BE COMPLETED BY INTERVIEWER

Applicant information was provided:

- ☐ In a face-to-face interview
☐ In a telephone interview
☐ By the applicant and submitted by fax or mail
☐ By the applicant and submitted via e-mail or the internet

Co-Applicant information was provided:

- ☐ In a face-to-face interview
☐ In a telephone interview
☐ By the applicant and submitted by fax or mail
☐ By the applicant and submitted via e-mail or the internet

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) | | | |