

## Consumer Loan Application

<b>Amount Applied For</b>	\$ <input style="width: 90%;" type="text"/>	<b>Term:</b>	<input style="width: 95%;" type="text"/> months
<b>Purpose of Loan</b>	<input style="width: 100%;" type="text"/>		

### IMPORTANT INSTRUCTIONS

Check the appropriate box

You must always complete Sections A and C of this application. In addition, you must also complete the following sections:

- If you are applying for individual credit in your own name and are relying on your income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only sections A and C. If the requested credit is to be secured, also complete Section D.
- If you are applying for joint credit with another person, complete all sections except D, providing information in B about the joint applicant. If the requested credit is to be secured, then complete section D.
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as basis for repayment of the credit requested (such as a co-signer), complete all sections except D to the extent possible, providing information in B about the person on whose alimony, support or income or assets you are relying. If the requested credit is to be secured, then complete section D.

### Section A – Information about Applicant

FIRST NAME		M.I.	LAST NAME		SUFFIX (Jr., Sr., III)
SOCIAL SECURITY NO.	DATE OF BIRTH	ID/DRIVER'S LICENSE NO.	MARITAL STATUS (Do not complete if applying for individual unsecured credit)		
				<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. Single, Divorced, and Widowed)	
PRESENT ADDRESS – NO. & STREET (Other than P.O. Box)			APT. NO.	CITY	STATE    ZIP
YEARS/MONTHS THERE	<input type="checkbox"/> Rent <input type="checkbox"/> Live With Others <input type="checkbox"/> Own/Buying <input type="checkbox"/> Landlord/Mortgagor		MONTHLY RENT/MORTGAGE PAYMENT	NO. OF DEPENDANTS	AGES OF DEPENDANTS
Years    Months			\$		
HOME PHONE	CELL PHONE	FAX	EMAIL ADDRESS		
PREVIOUS ADDRESS – NO. & STREET (If less than 2 years at above address)			APT. NO.	CITY	STATE    ZIP
EMPLOYER		EMPLOYER'S ADDRESS			
EMPLOYER'S TELEPHONE NO.	YEARS/MONTHS THERE	POSITION/OCCUPATION	NAME OF SUPERVISOR	GROSS ANNUAL SALARY	
	Years    Months			\$	
PREVIOUS EMPLOYER (If less than 2 years at current employment)		PREVIOUS EMPLOYER'S ADDRESS			
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU		HIS/HER ADDRESS		HIS/HER TELEPHONE NO.	RELATIONSHIP
<b>NOTE:</b> 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. Alimony, child support, or separate maintenance income received under <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
SOURCE OF OTHER INCOME				GROSS AMOUNT	
				\$                      per	
IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUESTED IS REPAYED?			HAVE YOU EVER BEEN GRANTED A LOAN FROM US?		
<input type="checkbox"/> No <input type="checkbox"/> Yes – Explain :			<input type="checkbox"/> No <input type="checkbox"/> Yes – When :		

### Section B – Information about Co-Applicant or Co-signer

If there is more than one Co-Applicant or Co-signer, complete a separate form for each.

FIRST NAME		M.I.	LAST NAME		SUFFIX (Jr., Sr., III)
SOCIAL SECURITY NO.	DATE OF BIRTH	ID/DRIVER'S LICENSE NO.	MARITAL STATUS (Do not complete if applying for individual unsecured credit)		
				<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. Single, Divorced, and Widowed)	
PRESENT ADDRESS – NO. & STREET (Other than P.O. Box)			APT. NO.	CITY	STATE    ZIP
YEARS/MONTHS THERE	<input type="checkbox"/> Rent <input type="checkbox"/> Live With Others <input type="checkbox"/> Own/Buying <input type="checkbox"/> Landlord/Mortgagor		MONTHLY RENT/MORTGAGE PAYMENT	NO. OF DEPENDANTS	AGES OF DEPENDANTS
Years    Months			\$		
HOME PHONE	CELL PHONE	FAX	EMAIL ADDRESS		
PREVIOUS ADDRESS – NO. & STREET (If less than 2 years at above address)			APT. NO.	CITY	STATE    ZIP
EMPLOYER		EMPLOYER'S ADDRESS			
EMPLOYER'S TELEPHONE NO.	YEARS/MONTHS THERE	POSITION/OCCUPATION	NAME OF SUPERVISOR	GROSS ANNUAL SALARY	
	Years    Months			\$	
PREVIOUS EMPLOYER (If less than 2 years at current employment)		PREVIOUS EMPLOYER'S ADDRESS			
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU		HIS/HER ADDRESS		HIS/HER TELEPHONE NO.	RELATIONSHIP
<b>NOTE:</b> 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. Alimony, child support, or separate maintenance income received under <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
SOURCE OF OTHER INCOME				GROSS AMOUNT	
				\$                      per	
IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUESTED IS PAID OFF?			HAVE YOU EVER BEEN GRANTED A LOAN FROM US?		
<input type="checkbox"/> No <input type="checkbox"/> Yes – Explain :			<input type="checkbox"/> No <input type="checkbox"/> Yes – When :		

**Section C – Information about Assets and Debts**

This section should be completed giving information about both the Applicant and the Co-Applicant or Co-Signer. If there is more than one Co-Applicant or Co-Signer, complete a separate form for each.

**Asset Owned** (use separate sheet if necessary)

Applicant				Co-Applicant or Co-signer (Name _____)			
CHECKING A/C NO.	BANK NAME	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	CHECKING A/C NO.	BANK NAME	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
SAVING A/C NO.	BANK NAME	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SAVING A/C NO.	BANK NAME	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER A/C TYPE	BANK NAME	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	OTHER A/C TYPE	BANK NAME	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
SECURITIES TYPE	ISSUER, NO. OF SHARES	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SECURITIES TYPE	ISSUER, NO OF SHARES	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
REAL ESTATE TYPE	LOCATION	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	REAL ESTATE TYPE	LOCATION	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
LIFE INSURANCE	ISSUER	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	LIFE INSURANCE	ISSUER	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
AUTOMOBILE	MAKE, MODEL, YEAR	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	AUTOMOBILE	MAKE, MODEL, YEAR	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
OTHERS	DESCRIPTION	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No	OTHER	DESCRIPTION	VALUE \$	SUBJECT TO DEBT? <input type="checkbox"/> Yes <input type="checkbox"/> No
TOTAL ASSETS		\$		TOTAL ASSETS		\$	

**Outstanding Debts** (Include charge accounts, installment contracts, credit cards, rent, mortgages, and other obligations – use separate sheet if necessary)

Applicant				Co-Applicant or Co-signer			
CREDITOR Landlord/Mortgage Holder	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$	CREDITOR Landlord/Mortgage Holder	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$
CREDITOR Bank:	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$	CREDITOR Bank:	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$
CREDITOR Firm:	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$	CREDITOR Firm:	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$
CREDITOR Other:	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$	CREDITOR Other:	ORIG. AMOUNT \$	PRESENT BAL. \$	MONTHLY PMT. \$
TOTAL DEBTS		\$		TOTAL DEBTS		\$	
CREDIT REFERENCES				CREDIT REFERENCES			
ARE YOU OBLIGATED TO MAKE ALIMONY, SUPPORT, OR MAINTENANCE PAYMENTS? <input type="checkbox"/> No <input type="checkbox"/> Yes – To whom? Amount/month \$				ARE YOU OBLIGATED TO MAKE ALIMONY, SUPPORT, OR MAINTENANCE PAYMENTS? <input type="checkbox"/> No <input type="checkbox"/> Yes – To whom? Amount/month \$			
ARE YOU A CO-MAKER, ENDORSER, OR GUARANTOR ON ANY LOAN OR CONTRACT? <input type="checkbox"/> No <input type="checkbox"/> Yes – For whom? To whom?				ARE YOU A CO-MAKER, ENDORSER, OR GUARANTOR ON ANY LOAN OR CONTRACT? <input type="checkbox"/> No <input type="checkbox"/> Yes – For whom? To whom?			
ARE THERE ANY UNSATISFIED JUDGEMENTS AGAINST YOU? <input type="checkbox"/> No <input type="checkbox"/> Yes – To whom owed? Amount \$				ARE THERE ANY UNSATISFIED JUDGEMENTS AGAINST YOU? <input type="checkbox"/> No <input type="checkbox"/> Yes – To whom owed? Amount \$			
HAVE YOU BEEN DECLARED BANKRUPT IN THE LAST 14 YEARS? <input type="checkbox"/> No <input type="checkbox"/> Yes – Where? Year				HAVE YOU BEEN DECLARED BANKRUPT IN THE LAST 14 YEARS? <input type="checkbox"/> No <input type="checkbox"/> Yes – Where? Year			

**Section D – Secured Credit** Complete only for secured. Briefly describe the property to be given as security/collateral.

PROPERTY DESCRIPTION

---

NAMES AND ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (IF ANY)

---

**Signatures**

I/We certify that everything I/we have stated in this application and on any attachments is true and correct to the best of my/our knowledge. I/We understand that making a false statement in this application is a crime under United States law. I/We understand that the Bank will keep this application whether or not it is approved. The Bank is authorized to check my/our credit and employment history and to answer questions others may ask the Bank about its credit experience with me/us. I/we understand that I/we must update credit information at the Bank's request if my/our financial condition changes. In addition, I/we acknowledge that I/we have received, read, and fully understand the Bank's Privacy Notice, Patriot Act Notice, and the Federal Equal Credit Opportunity Act Disclosure.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant's/Co-Signer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant's/Co-Signer's Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant's/Co-Signer's Signature \_\_\_\_\_ Date \_\_\_\_\_

FOR BANK USE ONLY:

APPL  EL  ITR  PS  ID  OFAC Checked \_\_\_\_\_  FEE \_\_\_\_\_ DATE: \_\_\_\_\_

CO-APPL  EL  ITR  PS  ID



## IMPORTANT DISCLOSURES REGARDING YOUR ACCOUNT

### PATRIOT ACT IMPORTANT INFORMATION ABOUT APPLICATION PROCEDURES

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 every customer.

What this means for you: When you apply for a loan, 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.

### PRIVACY ACT OUR PRIVACY PLEDGE TO YOU

As our customer you provide us with important information about yourself. We believe it is our responsibility to safeguard your personal and financial information. While some financial institutions share account owner information with other businesses, we are committed to keeping it confidential.

We have developed the attached privacy policy to ensure you the confidentiality you deserve. You have our promise that we will adhere to these guidelines. It is our pledge to you.

### THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT DISCLOSURE

The Federal Equal Credit Opportunity Act prohibits Metrobank New York from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, sexual orientation, military status or age (provided the applicant has the capacity to enter into a binding contract); because all or 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 Metrobank New York is:

The Office of the Comptroller of Currency (OCC)  
Customer Assistance Group  
1301 McKinney Street, Suite 3450, Houston, TX 77010 - 9050

Metrobank New York is prohibited from bringing up, in the taking of applications for loans, certain specific subjects which lend itself to discrimination. They are as follows:

- A) Whether or not you have or will have children. (Although inquiring as to the number and age of dependents is proper).
- B) Whether or not there exist child care problems.
- C) Whether or not there will be interruptions of income due to childbirth.
- D) Whether or not you are receiving alimony, child support or separate maintenance. (Unless voluntarily disclosed as a source of additional income which you wish to be considered).
- E) Whether you are widowed, divorced, or single. (Allowable designations are: married, unmarried, separated).
- F) Whether or not your telephone number is listed.

Within 30 days of receiving a completed application, Metrobank New York will notify you of its action – and the reasons for that action – on your application.