

Grand Rapids State Bank
 523 NW 1st Ave.
 Grand Rapids, MN 55744
 Phone: 218.326.9414
 Fax: 218.326.3659



CREDIT APPLICATION

TO BE COMPLETED BY APPLICANT AND CO-APPLICANT				FOR BANK USE ONLY	
IMPORTANT: TYPE OF CREDIT REQUESTED Check (✓) the appropriate boxes below and complete the applicable sections.				Date _____ DIR _____	
<input type="checkbox"/> Secured	<input type="checkbox"/> Individual Credit - relying solely on my income or assets			Verification _____	
<input type="checkbox"/> Unsecured	<input type="checkbox"/> Individual Credit - relying on my income or assets as well as income or assets from other sources			Approved <input type="checkbox"/> By _____	
	<input type="checkbox"/> Joint Credit - We intend to apply for joint credit (initials) _____			Declined <input type="checkbox"/> By _____	
Amount requested \$ _____	Payment date desired _____	For how long? _____	Proceeds of loan to be used for: _____		

SECTION A – INDIVIDUAL APPLICANT INFORMATION

Name (last, first, middle)			Social Security Number		
Birth date		Driver's License No.		No. of dependents	Ages of dependents
Telephone No.		Cell Phone No.		E-Mail Address	
Address (street, city, state, zip)			County	Do you <input type="checkbox"/> own or <input type="checkbox"/> rent?	How long?
Previous Address (street, city, state, zip)			County	Do you <input type="checkbox"/> own or <input type="checkbox"/> rent?	How long?
Name and address of nearest relative not living with you			Relationship	Telephone No. (include area code)	
Employer (company name and address)					How long?
Business phone	Ext.	Position or title		How often paid	Gross salary per month
Previous employer (company name and address)					How long?
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 separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
Sources of other income				Amount per month	
Is any income listed in this Section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (explain)				Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?	

SECTION B – JOINT APPLICANT OR OTHER PARTY INFORMATION

Name (last, first, middle)			Social Security Number		
Birth date		Driver's License No.		No. of dependents	
Telephone No.		Cell Phone No.		E-Mail Address	
Relationship to applicant (if any)			Present address (street, city, state, zip)		How long?
Employer (company name and address)					How long?
Business phone	Ext.	Position or title		How often paid	Gross salary per month
Previous employer (company name and address)					How long?
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 separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
Sources of other income				Amount per month	
Is any income listed in this Section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (explain)				Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?	

SECTION C – MARITAL STATUS

Complete only if for joint or secured credit or applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested.

Applicant	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced, and widowed)
Other party	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced, and widowed)

SECTION D – ASSET & DEBT INFORMATION

If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Person.
Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

ASSETS OWNED (Use separate sheet if necessary)

DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT?	VALUE
Checking account number(s) (where)			\$
Savings account number(s) (where)			
Certificate of deposit(s) (where)			
Marketable securities (issuer, type, no. of shares)			
Real estate (location, date acquired)			
Life Insurance (issuer, face value)			
Automobiles (make, model, year)			
Other (list)			
TOTAL ASSETS			\$

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages and other obligations. Use separate sheet if necessary)

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
Landlord or Mortgage Holder	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$ (Omit Rent)	\$ (Omit Rent)	\$
Automobiles (describe)					
TOTAL DEBTS					\$

COMPLETE THE FOLLOWING INFORMATION ABOUT BOTH THE APPLICANT AND JOINT APPLICANT OR OTHER PERSON (if applicable):

Are obligated to make Alimony, Support or Maintenance payments? No Yes
 If Yes, to (name and address) _____ Amt. per month \$ _____
 Are you a co-maker, endorser, or guarantor on any loan or contract? No Yes If Yes, for whom? _____ To whom? _____
 Are there any unsatisfied judgments against you? No Yes If Yes, to whom owed? _____ Amount \$ _____
 Have you been declared bankrupt in the last 10 years? No Yes If Yes, where? _____

SECTION E – SECURED CREDIT

Complete only if credit is to be secured. Briefly describe the property to be given as security.

Property description _____
 Name and address of all co-owners of the property _____
 If the Security is Real Estate, give the full name of your spouse (if any) _____

SIGNATURES. I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below, I authorize you to check my credit and employment history and to answer questions others may ask you about my credit records with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature _____ Date _____ Other Signature (Where Applicable) _____ Date _____

CREDIT APPLICATION DISCLOSURE FOR INSURANCE / ANNUITY PRODUCTS

Name(s) / Address(es) of Applicant(s) ("you", "your")	Name / Address of Lender (Creditor) ("we", "us", "our") Grand Rapids State Bank 523 NW 1st Avenue Grand Rapids, MN 55744
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**IMPORTANT NOTICE
DO NOT SIGN THIS FORM UNTIL YOU READ IT AND UNDERSTAND ITS CONTENTS**

CREDIT APPLICATION DISCLOSURE

Insurance and/or annuity products may be solicited, offered or sold in connection with the type of credit for which you have applied. We cannot, as a condition for you to obtain the credit:

- require you to purchase an insurance product or annuity from us, or from any of our affiliates; or
- make you agree not to obtain, or prohibit you from obtaining, an insurance product or annuity from another company that is not affiliated with us.

INSURANCE / ANNUITY PRODUCTS DISCLOSURE

Any insurance product or annuity that you may agree to purchase from us or our affiliates:

- is not a deposit or other obligation of ours, or our affiliates; and
- is not guaranteed by us or our affiliates; and
- is not insured by the Federal Deposit Insurance Corporation (FDIC) or any other agency of the United States (with the exception of any federal crop insurance or federal flood insurance); and
- is not insured by us or our affiliates; and
- if the insurance product or annuity that you agree to purchase from us or our affiliates involves investment risk, this risk includes the possible loss of value and principal.

ACKNOWLEDGMENT. The undersigned Applicant(s) hereby acknowledge(s) receipt of this Credit Application Disclosure For Insurance / Annuity Products on the date indicated below, and has read and understood its contents.

_____	_____	_____	_____
Applicant's Signature	Date	Applicant's Signature	Date
_____	_____	_____	_____
Applicant's Signature	Date	Applicant's Signature	Date

LENDER CERTIFICATION. The undersigned hereby certifies that on behalf of Lender he/she orally provided the above disclosures to the Applicant(s) on the date noted below.

By _____ Date: _____

Its _____

LENDER'S COPY

Covered Borrower Identification Statement

Federal law provides important protections to active duty members of the Armed Forces and their dependents. To ensure that these protections are provided to eligible applicants, we require you to **check and sign one** of the following statements as applicable:

- I AM a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer.

Date

- I AM a dependent of a member of the Armed Forces on active duty as described above, because I am the member's spouse, the member's child under the age of eighteen years old, or I am an individual for whom the member provided more than one-half of my financial support for 180 days immediately preceding today's date.

Date

OR

- I AM NOT a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer (or dependent of such a member).

Date

Warning: It is important to fill out this form accurately. Knowingly making a false statement on a credit application is a crime.