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SHORT FORM CREDIT APPLICATION (For Wisconsin residents only)

(1 of Wilderick Toolderite ethy)	
Date of Application	

						Da	ate of Application				
o Creditor:											
1. APPLICANT(S). Opouse or joint credit in y											
married and	a Wisconsin ı	resident. On	ly the a	pplican	t signs on pag	e 2.	plete Spouse Coluuse Coluuse Columns. Both				ouse only if you are
	with					-					ant must complete a
	a Wisconsin	resident. On	lly the a	pplican	t signs on paç	je 2.					the joint applicant is
Collateral offered Owner(s) of collate	Yes No	. If yes, des	cribe co	ollateral	* PU	rpose.					
Interest rate:		No.	. of Mor	nths:			Type: _				
Applicant				Α	PPLICANT II	IFOR!			Spot		
applicant Name						Spous	Joint-Ap e Name	plicant (Joint C	Credit) Nor	n-Appli	icant
For Wisconsin resident only Married Unma Legally Separated	′ I	Dependents Other Than Self & Spouse ed No. Ages			f & Spouse	Depen No.	Dependents (not listed by Applicant) No.				
Social Security Number	Date of Birth	Driver's Lice	nse (or [State	e ID Card) No.	Social	Security Number	Date of Birth	Driver's Licens	e (or	State ID Card) No.
Driver's License (or State ID Card) Name Expiration Date State Changed Name on Driver's license or State ID Card in Past 5 Years No Yes, and give Prior Name				Date State	Driver's License (or State ID Card) Name Expiration Date State Changed Name on Driver's License or State ID Card in Past 5 Years No Yes, and give Prior Name						
Home Phone Cell	Phone	E-Mail Addr	ress			Home		I Phone	E-Mail Addre	ess	
Present Address (Street, City	, State & ZIP)	Own	Rer	nt	No. Yrs.	Preser	nt Address (Street, C	ty, State & ZIP)	Own	Re	ent No. Yrs.
Previous Address (Street, Cit	y, State & ZIP)				No. Yrs.	Previo	us Address (Street, C	City, State & ZIP	1		No. Yrs.
	,				IPLOYMENT						V 11: : 1
lame & Address of Employe	er [Self Emp	loyea	Yrs. o	n this job	Name	& Address of Employ	yer	Self Employ	/ea	Yrs. on this job
				1	Monthly ome \$						Gross Monthly Income \$
Position				Busine	ss Phone	Positio	n				Business Phone
lame of Previous Employer		Self Emp	loyed	Yrs. o	n this job	Name	of Previous Employe	er	Self Employ	/ed	Yrs. on this job
(Need not reveal income from repaying this obligation).	om medical insu						I support and ma pplicant(s) does not		such income co	nsidere	ed as a basis for
Gross Monthly Income	Applicant		Spouse		Total		Descri	oe Other Income	Source		Monthly Amount
Overtime	\$	\$			\$		Applicant				\$
Bonuses Commissions							Applicant Spouse				
Dividends/Interest							Spouse				
Jet Rental Income Other (complete section to ne right to describe)											
otal (incl. base employment)	\$	\$			\$						
							EPARATE MAINTI considered as a basi				
(ind of Income	Name of Payor					Kind o	f Income	Name of Payor			
mount per Month	Ends Amt. Past Due \$			Amour \$	nt per Month	Ends		Amt. P	ast Due		
s any listed income likely to	be reduced before	ore the credit	requeste	ed is pai	id off?	Is any	listed income likely t	o be reduced be	fore the credit r	equeste	ed is paid off?
No Yes I	(Explain in detainst relative not live	<u>'</u>	sheet)			Name	No Yes and Address of near		<u> </u>	sheet)	·
Acres	A				Ass	ets	A				A
Assets Accounts in Banks	\$ Amou	Amount Assets Real Estate Owned				\$	Amount	Other A	ssets	\$	Amount
Stocks & Bonds	\$	Retirement Funds				\$					

Automobiles

\$

Life Insurance (Face Value)

Total Assets

LIST ALL DEBTS AND OBLIGATIONS OF PERSONS IDENTIFIED IN APPLICANT AND SPOUSE COLUMNS. (Use continuation sheet to list any additional liabilities.)

	. Use continuation sheet if necessary. Indicate by (*) LIABILITIES	Monthly Payment & Months Left to Pay	Unpaid Balance	Credit Limit	Debtor
Name and Address of (Creditor	\$ Payment/Months	\$	\$	APPLICANT SPOUSE
Acct. no.					
Name and Address of (Creditor	\$ Payment/Months	\$	\$	APPLICANT SPOUSE
Acct. no.					
Name and Address of 0	Creditor	\$ Payment/Months	\$	\$	APPLICANT SPOUSE
Acct. no.					
Name and Address of 0	Creditor	\$ Payment/Months	\$	\$	APPLICANT SPOUSE
Acct. no.					
Name and Address of 0	Creditor	\$ Payment/Months	\$	\$	APPLICANT SPOUSE
Acct. no.		†			
Name and Address of (Creditor	\$ Payment/Months	\$	\$	APPLICANT SPOUSE
Acct. no.					
Name and Address of 0	Creditor	\$ Payment/Months	\$	\$	APPLICANT SPOUSE
Acct. no.		7			
Alimony/Child Support	/Separate Maintenance Payments Owed to:	\$	When Payments Due	Ends	Amt. Past Due \$
	TOTAL MONTHLY PAYMENTS	\$			
Stats., adversely affect	ED APPLICANTS: No provision of any man s the interest of the creditor unless the credit or decree or has actual knowledge of the ad	or, prior to the time the cr	nilateral statement under s.766 edit is granted or an open-end	.59, Wis. Stats., or court dec credit plan is entered into, is	ree under s.766.70, Wis. s furnished a copy of the
NOTICE: We may report.	ort information about your account to credit b	oureaus. Late payments, n	nissed payments, or other defa	ults on your account may be	e reflected in your credit
(1) represent that the a our credit, employment the extent not prohibite	taining the credit described above, and any fabove statements are true and complete, (2) history or any other information, including cred by applicable law, credit experience with gree to the provisions of any rules, regulations	authorize the creditor name redit reports (although the me to others, and to answ	ed above, or its agents, to ver creditor may rely on these stat er any questions about our cr	ify them and obtain additional ements without any further vedit experience and other fire	al information concerning rerification), to furnish, to nancial relationships with

The undersigned understand that it may be a crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OBTAINING CREDIT

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 obtains credit.

What this means for you: When you obtain credit, we will ask you 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.

	Applicant Sign Here		Date
(Joint of the credit being applied for, if granted, will	Dredit Only) be incurred in the interest	of my marriage or family. I u	nderstand the creditor may be required by law
to give notice of this credit transaction to my spou			Date
To be Completed by Interviewer: This 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 Inte		Creditor by	
Loan Originator's Signature X Loan Originator's Name (print or type)	Loan Originator NMLS	R ID	Date Loan Originator's Phone Number (including area code)

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Loan Originator Organization NMLSR ID

Loan Originator Organization's Address

Loan Originator Organization's Name