# **IMPORTANT**:

PLEASE USE YOUR FULL LEGAL NAME (AS IT APPEARS ON YOUR SOCIAL SECURITY CARD) ON ALL LOAN APPLICATION DOCUMENTATION AND INCLUDE A COPY OF YOUR DRIVER'S LICENSE WITH THIS PACKET

### Borrower Appraisal Disclosure

Under the Regulation B ECOA Act, the appraisal of your property subject to this real estate loan request will be ordered by your real estate loan specialist. You will be required to pay for the appraisal of your property. This appraisal fee may be non-refundable unless otherwise required by law. The collection of this appraisal fee does not guarantee a loan approval and is not a commitment to lend.

You are entitled to receive a copy of your property appraisal report no later than three business days prior to the closing of your mortgage loan transaction, at no cost to you. If you do not receive a copy of your appraisal report at least three business days prior to the loan closing date, you will be required to postpone your closing for three business days from the date you received the appraisal.

At your discretion, the following two options are available to you at this time. Please select from the following options:

\_\_\_\_ I request that my appraisal be made available to me, regardless of when the closing may be scheduled to take place. I understand I am required to have a minimum of three business days after receipt to review my appraisal report. I do not wish to waive the right to those three business days.

OR
\_\_\_\_ I request that my appraisal be made available to me, regardless of when the closing may be scheduled to take place. I hereby waive my rights to have a minimum of three business days after receipt to review my appraisal report.

APPLICANT DATE APPLICANT DATE

### CONSUMER LOAN APPLICATION

#### IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

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 opens an account.

What this means for you: When you open an account, 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. What type of credit are you requesting? (Please check appropriate box:) TO: Name/Address of Lender First State Bank Athens **UNSECURED** P O Box 471 INDIVIDUAL (Own income or assets) INDIVIDUAL (Own income or assets plus income or assets from other sources) Athens, Tx 75751 JOINT (please initial) COSIGNER Interest Rate Term Payment % LOAN ORIGINATION COMPANY NAME: LOAN ORIGINATION COMPANY IDENTIFIER: LOAN ORIGINATOR NAME: LOAN ORIGINATOR LICENSE NUMBER: APPLICANT/COSIGNER INFORMATION Taxpayer ID Number (SSN/TIN) ne (Last) (First) (Suffix) Street Address Driver's License/ID Number State Home Phone Number How Long There No. of Dependents Age of Dependents Previous Address (if less than 2 years at current address) How Long There Employer Phone Number Address Position How Long How Often Paid: Weekly Monthly \$ Gross Net Average Monthly Overtime Pay \$ Previous Employer Address Position How Long Nearest Relative Not Living With You Relationship State ZIP Code Relative's Phone Number Present Mortgage Holder/Landlord Phone Number Monthly Payment \$ Immigration Status Perm. Resident of U.S. U.S. Citizen Other: Marital Status: Do not complete if this application is for individual unsecured credit unless responding party resides in a community property state or is relying on property located in such a state for repayment of the credit requested. Unmarried (including single, divorced, and widowed) Married Separated Other Income: Amount \$ Frequency Source Alimony, Child Support, Separate Maintenance Payments: You are not required to disclose income from alimony, child support, or separate maintenance payments. However, if you are relying on income from alimony, child support, or separate maintenance payments as a basis for repayment of this obligation, please complete the information below. Payment Received Pursuant to: Court Order Written Agreement Oral Understanding Alimony per Month \$ Child Support per Month \$ Separate Maintenance Payment per Month \$ CO-APPLICANT INFORMATION Name (Last) (First) (MI) (Suffix) Taxpayer ID Number (SSN/TIN) Street Address Driver's License/ID Number State Home Phone Number State ZIP Code County How Long There No. of Dependents Age of Dependents City Previous Address (if less than 2 years at current address) How Long There Phone Number Employer Address Position How Long How Often Paid: Weekly Monthly \$ Gross Average Monthly Overtime Pay \$ Previous Employe How Long Nearest Relative Not Living With You Relationship ZIP Code Address City State Relative's Phone Number Present Mortgage Holder/Landlord Phone Number Monthly Payment \$ Immigration Status U.S. Citizen Perm. Resident of U.S. Marital Status: Separated Unmarried (including single, divorced, and widowed) Other Income: Amount \$ Frequency Source Alimony, Child Support, Separate Maintenance Payments: You are not required to disclose income from alimony, child support, or separate maintenance payments. However, if you are relying on income from alimony, child support, or separate maintenance payments as a basis for repayment of this obligation, please complete the information below. Oral Understanding Court Order Payment Received Pursuant to: Written Agreement Alimony per Month \$ Child Support per Month \$ Separate Maintenance Payment per Month \$ ADDITIONAL INFORMATION If you, a joint applicant, or other party answers "yes" to any of the following questions, please explain in the space provided. Are you a guarantor or co-maker of any leases, contracts, or debts? Applicant: Yes No Joint Applicant/Other Party: Yes No Are there any suits or judgments pending against you? Applicant: Nο Joint Applicant/Other Party: Nο Yes

No

Yes

Joint Applicant/Other Party:

Have you been declared bankrupt in the last 10 years? Applicant:

No

Yes

		COLLATI	ERAL INFORMATION				
Collateral to registration	o Secure Account: The description shoul numbers, etc., as may be applicable.	d include make, year, length, loan	value, selling price, existing li	ens, serial numbers, name(s	) of titleholder(s), lega	al description, license or	
		CUI	RRENT ASSETS				
Please attac	ch additional sheet(s) if more space is requir	ed for the Current Assets section.					
DESCRIPTION OF ASSET		0)	OWNER NAME(S)		YES/NO	VALUE	
					\$		
T-1-1 A :	- Constant Additional Constant						
	s from Addendum				\$		
TOTAL ASS	BE15		STANDING DEBTS		\$	\$	
Use the first	t column (Applicant Code) to indicate whet	her the debt is the responsibility of the ACCOUNT	the Applicant (A), Co-Applicant ORIGINAL	(C), or Joint Applicants (J).	MONTHLY	Check box if to be	
CODE	NAME OF CREDITOR	NUMBER	AMOUNT	BALANCE	PAYMENTS	paid from proceeds	
			\$	\$	\$		
	Total Debts from Addendum		\$	\$	\$		

If joint application, read singular pronouns in the plural.) I warrant the truth of the information contained in this application and that all statements made in this application are complete and that I have no other outstanding financial obligations of any kind, including any guarantor or cosigner liability. Lender, its agents, successors, and assigns, will rely on the information contained in this application, and I have a continuing obligation to amend and supplement the information provided in this application if any of the material facts I represented should change before closing. If I have left any spaces in this application blank, Lender, its agents, successors, and assigns, may assume the information requested is adverse. I authorize Lender, its agents, successors, assigns, and employees, to investigate and verify all information I provided to Lender, its agents, successors, and assigns. I understand that it is my sole and exclusive responsibility to determine all the tax effects of the loan and acknowledge that Lender, its agents, successors, and assigns, have not provided any tax advice to me. Lender, its agents, successors, and assigns, can give information about my loan to credit reporting agencies and others who may properly receive that information. If Lender approves this application and Lender, its agents, successors, and assigns, are required to report the amount of interest paid on the loan to the Internal Revenue Service, I understand that Lender, its agents, successors, and assigns, will report using the Social Security Number (tax identification number) shown above. I understand that if the Social Security Number is incorrect, that I may be subject to Internal Revenue Service penalties. I understand Lender, its agents, successors, and assigns, will keep this application whether or not my credit request is approved.

Certification: I certify that the information provided in this application is true and correct as of the date set forth opposite my signature on this application and acknowledge my understanding that any intentional or negligent misrepresentations of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq., and liability for monetary damages to the Lender, its agents, successors, assigns, insurers, and any other person who may suffer any loss due to reliance upon any misrepresentation I made in this application or in any other manner.

Signature of Co-Applicant

CREDITOR USE ONLY

Loan Approval (Indicate Conditions of Loan, if Any)

Date Application Received Received By Amount Requested \$

Date Application Completed Approved By Amount Approved \$

Telephone

Mail

#### Reason(s) for Adverse Action Concerning Credit

No Credit File

This application was taken by:

Signature of Applicant or Cosigner

Insufficient Number of Credit References Provided

Face-to-Face Interview

Limited Credit Experience

Collection Action or Judgment Garnishment or Attachment

Foreclosure or Repossession

Delinquent Credit Obligations (past or present with others)

Bankruptcy

Number of Recent Inquiries on Credit Bureau Report

Other - Specify:

Unacceptable Type of Credit References
Poor Credit Performance With Us

Temporary or Irregular Employment Insufficient Length of Employment

Insufficient Income for Amount of Credit Requested

Internet

Excessive Obligations in Relation to Income
Temporary Residence

Insufficient Length of Residence

Unable to Verify Credit References
Unable to Verify Employment
Unable to Verify Income
Unable to Verify Residence

Value or Type of Collateral Not Sufficient

Date

Unacceptable Appraisal
Unacceptable Leasehold Estate

We Do Not Grant Credit to Any Applicant

on the Terms and Conditions You Request.

## **Real Estate E-Sign Disclosure**

This First State Bank, Athens Texas E-Sign Disclosure ("Disclosure") applies to the Real Estate loan that you have requested. The words "we," "us," and "our" means First State Bank, Athens Texas and the words "you" and "your" means you, each consenting party, who have applied for the loan.

As used in this Disclosure, "Communication" means any authorization, agreement, disclosure, notice, or other information related to your Account, including but not limited to information that we are required by law to provide to you in writing.

Your consent to receive electronic Communications and transactions includes, but is not limited to: • Initial disclosures or agreements for your loan • Notices or disclosures about a change in the terms of your loan • Appraisals Method of Providing Communications to You in Electronic Form

All Communications that we provide to you in electronic form will be provided via e-mail at the e-mail address you specify on this disclosure.

**How to Withdraw Consent** You may withdraw your consent to receive Communications in electronic form by contacting the Real Estate Department at 903-676-1900. We may treat your provision of an invalid e-mail address or the subsequent malfunction of a previously valid address as a withdrawal of your consent to receive electronic communications. We will not impose any fee to process the withdrawal of your consent to receive electronic Communications. Any withdrawal of your consent to receive electronic Communications will be effective only after we have a reasonable period of time to process your withdrawal.

**Hardware and Software Requirements** In order to access, view, and retain electronic Communications that we make available to you, you must have: · E-mail Address; · Internet browser Internet Explorer; · Adobe Acrobat Reade.

**Requesting Paper Copies** We will not send you a paper copy of any Communication from us, unless you request it or we otherwise deem it appropriate to do so. You can obtain a paper copy of an electronic Communication by printing it yourself or by requesting that we mail you a paper copy. To request a paper copy, contact the credit department of First State Bank, Athens Texas by telephone at 903-676-1900.

**Communications in Writing** All Communications in either electronic or paper format from us to you will be considered "in writing." You should print or download for your records a copy of your Early Disclosures, this Disclosure, your initial authorization to receive e-mail disclosures, any changes to that authorization, and any other Communication that is important to you.

**Federal Law** You acknowledge and agree that your consent to electronic Communications is being provided in connection with a transaction affecting interstate commerce that is subject to the federal Electronic Signatures in Global and National Commerce Act, and that you and we both intend that the Act apply to the fullest extent possible to validate our ability to conduct business with you by electronic means.

**Termination/Changes** We reserve the right, in our sole discretion, to discontinue the provision of your electronic Communications, or to terminate or change the terms and conditions on which we provide electronic communications. We will provide you with notice of any such termination or change as required by law.

Yes, I agree to receiving documents and disclosures in connection with my loan via e-mail.
No, I do not wish to receive documents and disclosures in connection with my loan via e-mail, please provide them via mail.
Customer Name
Email Address
Date:
Yes, I agree to receiving documents and disclosures in connection with my loan via e-mail.
No, I do not wish to receive documents and disclosures in connection with my loan via e-mail, please provide them via mail.
Customer Name
Email Address
Date:

## BORROWER'S BLANKET AUTHORIZATION

PRIVACY ACT NOTICE: This information is to be used by the agency collecting it or its assignees in determining

whether you qualify as a prospective mortgagor or borrower under its program. It will not be disclosed outside the agency except as required by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38 USC, Chapter 37 (if VA); by 12 USC, Section 1701 et seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et seq., or 7 USC, 1921 et seq. (if USDA/FMHA). **Borrower Information Lender Information** Name 1: Social Security Number 1: 130 F Corsicana Name 2: Social Security Number 2: Street Address 1: City/ST/ZIP: BORROWER AUTHORIZATION: I hereby authorize the Lender to verify my past and present employment earnings records, bank accounts, stock holdings, and any other balances that are needed to process my loan application. I further authorize the Lender to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. It is understood that a copy of this form will also serve as authorization.

Date

Signature

Date

Signature



# Regulation B Notice of Intent to Apply for Joint Credit

Regulation B and the Equal Credit Opportunity Act requires that a lender obtain evidence of each loan applicants intent to apply for joint credit before a credit decision can be made. Failure to complete when required will render the application/request for credit incomplete.

(Please mark one of the following choi	ces)	
I (we) intend to apply for joint cre I (we) do not intend to apply for jo		
(You acknowledge receipt of a copy of	this notice on today's date)	
Print or type Applicant Name	Applicant Signature	Today's Date
Print or type Applicant Name	Applicant Signature	Today's Date
Print or type Applicant Name	Applicant Signature	Today's Date



## **AUTHORIZATION TO PULL CREDIT**

By signing this form, I hereby authorize First State Bank to pull my personal credit report in connection with my loan request.

	Applicant		Joint Applicant
Name (print):			
Address:			
Social Security #:			
Birth Date:		-	
Today's Date:		-	
 Sig	nature	_ S	Signature

P.O. Box 471, Athens, Texas 75751 \* 903-676-1900 \* Fax 903-675-9333 \* www.fsbathens.com

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