

APPLICATION MUST BE FILLED OUT IN FULL

CREDIT APPLICATION

Bank of Perry County
Lobelville and Linden, TN.

Bank of Lewis County
Branch of Bank of Perry County
Hohenwald, TN

NO ONE WILL RECEIVE FUNDS
ON AUTO LOAN WITHOUT
PROOF OF INSURANCE & TITLE

Amount Requested	No. Months	Proceeds To Be Used For -- If Home Loan, Furnish Address		
Full Name		Age	Phone	Social Security Number
Mailing Address				Cell Phone
Residence Address if different from above				How Long
Date of Birth	Driver's License #	Exp. Date		Issue Date
Present Employer			How Long	Business Phone
(Do not complete if this is an application for individual unsecured credit.) Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried <input type="checkbox"/>		Net Salary or Comm.	No. Dependents	Age of Dependents
Name and Address of nearest relative				

GENERAL INFORMATION

Are you a defendant in any suits of legal action? No Yes (Explain): _____

Have you been declared Bankrupt in the last 14 years? No Yes (Explain): _____

OUTSTANDING DEBTS

Creditor	Type Debt	Name Acct. Carried	Pres. Bal.	Monthly Pmts.

List Collateral Offered _____

	Market Value
	If Auto, Mileage

Credit References (name two) _____

Name of Insurance Agent: _____

DO NOT COMPLETE THIS SECTION UNLESS YOU ARE APPLYING FOR JOING CREDIT WITH A SPOUSE OR ANOTHER PERSON

Name of spouse or comaker (if any)	Age	Phone	Social Security Number
Relationship	Address		How Long
Date of Birth	Driver's License #	Exp. Date	Issue Date
Present Employer	Phone	Position	Net Salary or Comm.

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.

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

IMPORTANT APPLICATION INSURANCE DISCLOSURE

Borrower(s) Name/Address ("I", "Me", "My")	Lender(s) Name/Address Bank of Perry County P. O. Box 341 Linden, TN 37096
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The Lender may not condition an extension of credit on either.

- (1) My purchase of an insurance product from the lender or affiliates:
- (2) My agreement not to obtain, or a prohibition on me from obtaining, an insurance product from an unaffiliated entity.

BY SIGNING BELOW, THE UNDERSIGNED ACKNOWLEDGES A VERBAL AND WRITTEN OF A COPY OF THIS APPLICATION INSURANCE DISCLOSURE.

Signature

Date

Signature

Date