



Home Equity Line of Credit Application

Please Print and Fax this form to 312-491-7245

TYPE OF ACCOUNT REQUESTED

Amount \$	Length of Account Term	Periodic Payment Date	Purpose
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Check one to indicate the type of account you are requesting. Note: Married applicants may apply for separate accounts.

Joint Account Individual Account - Relying solely on my income and assets.

COLLATERAL PROPERTY

Address	Year Built	Date Purchased	Present Value	Balance Owed
Title in Name(s) of	Address of Title Holder	Name and Address of Mortgage Holder		
		Phone No.	Acct No.	

INDIVIDUAL APPLICANT INFORMATION

Name	Birth Date	Social Security Number		
Address	County		Drivers License Number	
Home Phone	Business Phone	Number of Dependents	Ages of Dependents	
Employer/Self Employed	Position		Years Employed	
Employer's Address				
Previous Employer	Position	Years Employed	Previous Employer's Address	
Name and Address of Applicant's Nearest Relative			Relationship	
Wages, Salary, Commissions				
Gross /month \$	Net/month \$	How Often Paid		
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered. Alimony, child support, separate maintenance received pursuant to:				
<input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding Other Income: Source _____ Amount/Month \$ _____				
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced, widowed)				

JOINT APPLICANT OR OTHER PARTY INFORMATION

Name	Birth Date	Social Security Number		
Address	County		Drivers License Number	
Home Phone	Business Phone	Number of Dependents	Ages of Dependents	
Employer/Self Employed	Position		Years Employed	
Employer's Address				
Previous Employer	Position	Years Employed	Previous Employer's Address	
Name and Address of Applicant's Nearest Relative			Relationship	
Wages, Salary, Commissions				
Gross /month \$	Net/month \$	How Often Paid		
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered. Alimony, child support, separate maintenance received pursuant to:				
<input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding Other Income: Source _____ Amount/Month \$ _____				
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced, widowed)				

ASSET AND DEBT INFORMATION

If "Joint" Applicant or Other Party Information" section was completed above, this section should be completed giving information about both the Applicant and the Joint Applicant or Other Party. Please identify the Applicant-related information with an "A". Attach additional sheets if necessary.

ASSETS

Description of Assets	Name(s) of Owner(s)	Subject to Debt: Yes/No	Value
Checking Account Number(s) (where)			
Savings Account Number(s) (where)			
Automobiles (Make, Model, Year)			
Marketable Securities (Issuer, Type, No. of Shares)			
Life Insurance (cash value)			
Other Real Estate (Location, when acquired)			
Other Assets (Describe)			
Total Assets			

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages and other obligations.)

Creditor	Account Number	Name in which the Account is Carried	Original Amount	Present Balance	Monthly Payments
Landlord or Mortgage Holder on other Real Estate					
Auto Loan					
Auto Loan					
Credit or Charge Card					
Total Debts			\$	\$	\$

CREDIT REFERENCES

1.	\$	Date Paid
2.	\$	Date Paid

GENERAL INFORMATION

If you or 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? Yes No

Are there any suits or judgements pending against you? (include amount) Yes No

Have you been declared bankrupt in the last 10 years? Yes No

New York Residents: A consumer report may be ordered in connection with your application. Upon your request, we will inform you whether or not a report was ordered. If a report was ordered we will tell you the name and address of the consumer reporting agency that provided the report. Subsequent reports may be ordered or utilized in connection with an update, renewal or extension of credit for which you have applied.

Ohio Residents: The Ohio laws against discrimination require all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Married Wisconsin Residents: No provision of any marital property agreement, unilateral statement under Wisconsin Statutes §766.59 or a court decree under Wisconsin Statutes §766.70 adversely affects the interest of the lender unless the lender, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the lender is incurred.

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 record with you. I understand that I must update this credit information at your request and if my financial condition changes.

I acknowledge receipt of the Home Equity Brochure and the lender's Home Equity disclosure statement on today's date.

Applicant X _____ Date _____ Joint Applicant X _____ Date _____

BANK USE ONLY

This application was taken by	<input type="checkbox"/> Face to Face Interview	<input type="checkbox"/> Mail	<input type="checkbox"/> Telephone	<input type="checkbox"/> Internet
Date Application Received	Received By	Amount Requested	\$	
Approved By	Approved By	Amount Approved	\$	
Rescindable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Funding Date	Initial Advance	\$	

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