

JERSEY STATE BANK
CREDIT APPLICATION

| TYPE OF CREDIT REQUESTED | | | | FOR CREDITOR USE ONLY | |
|--|-----------|----------------------|--|--|--|
| IMPORTANT (check the appropriate boxes below and complete the applicable sections) | | | | Date: ____/____/____ Rate: _____ | |
| <input type="checkbox"/> SECURED <input type="checkbox"/> UNSECURED | | | | Approved by: _____ Declined by: _____ | |
| <input type="checkbox"/> INDIVIDUAL CREDIT – relying solely on my income or assets | | | | Single CL ____ Joint CL ____ Single CL&AH ____ | |
| <input type="checkbox"/> INDIVIDUAL CREDIT – relying on my income or assets as well as income or assets from other sources | | | | Insurance: _____ | |
| <input type="checkbox"/> JOINT CREDIT | | | | _____ | |
| Amount Requested | How long? | Payment Date Desired | Payment Method? | Phone No: _____ | |
| \$ _____ | _____ | ____/____/____ | <input type="checkbox"/> Monthly <input type="checkbox"/> _____ | Checks Payable to: _____ | |
| PROCEEDS OF THE LOAN TO BE USED FOR: | | | | _____ | |
| _____ | | | | _____ | |
| _____ | | | | _____ | |

SECTION A: INDIVIDUAL APPLICANT INFORMATION

| | | |
|--|-------------|------------------|
| Name: | | SSN: |
| | | Date of birth: |
| Current address: | | City, State, Zip |
| Home Phone: | Cell Phone: | E-mail: |
| <input type="checkbox"/> Own <input type="checkbox"/> Rent | How long? | |
| Previous address: | | City, State, Zip |
| <input type="checkbox"/> Owned <input type="checkbox"/> Rented | How long? | |

EMPLOYMENT INFORMATION

| | | |
|--------------------|-----------|-----------------------|
| Current employer: | | Position: |
| Employer address: | | City, State, Zip |
| Work Phone: | How long? | Gross Monthly Income: |
| Previous employer: | | Position: |
| Employer address: | | City, State, Zip |
| Work Phone: | How long? | Gross Monthly Income: |

APPLICATION INFORMATION CONTINUED

| | | |
|---|-------------|------------------|
| Name of a relative not residing with you: | | |
| Address: | | City, State, Zip |
| Relationship: | Home Phone: | Cell Phone: |

OTHER SOURCES OF INCOME

| | |
|--|--|
| Sources of other Income: | Amount per month \$ |
| 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 Ordered <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding | |
| 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, please explain: _____ | Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, when? _____ |

SECTION B: JOINT APPLICANT OR OTHER PARTY INFORMATION

Complete only if: for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property.

| | | |
|--|-------------|----------------------------|
| Name: | | SSN: |
| | | Date of birth: |
| Current address: | | City, State, Zip |
| Home Phone: | Cell Phone: | E-mail: |
| <input type="checkbox"/> Own <input type="checkbox"/> Rent | How long? | |
| Previous address: | | City, State, Zip |
| <input type="checkbox"/> Owned <input type="checkbox"/> Rented | How long? | Relationship to Applicant: |

JOINT APPLICANT EMPLOYMENT INFORMATION

| | | |
|--------------------|-----------|-----------------------|
| Current employer: | | Position: |
| Employer address: | | City, State, Zip |
| Work Phone: | How long? | Gross Monthly Income: |
| Previous employer: | | Position: |
| Employer address: | | City, State, Zip |
| Work Phone: | How long? | Gross Monthly Income: |

JOINT APPLICANT OTHER SOURCES OF INCOME

| | |
|--|--|
| Sources of other Income: | Amount per month \$ |
| 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 Ordered <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding | |
| 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, please explain: _____ | Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes If 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: Married Separated Unmarried (including single, divorced and widowed)
 Other Party: Married Separated 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 the Joint Applicant or Other Person. Please mark Applicant related information with "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?) | | | \$ |
| Real Estate (location, date acquired) | | | \$ |
| Automobiles (make, model, year) | | | \$ |
| TOTAL ASSETS \$ | | | |

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

| Creditor | Account no. | Name in which the Account is Carried | Original Amount | Present Balance | Monthly Payments |
|-----------------------------|--|--------------------------------------|-------------------|-------------------|------------------|
| Landlord or Mortgage Holder | <input type="checkbox"/> Rent <input type="checkbox"/> Mortgage | | (Omit Rent) \$ | (Omit Rent) \$ | \$ |
| Automobiles (describe) | | | | | |
| | | | | | |
| Credit Cards | | | | | |
| | | | | | |
| | | | | | |
| TOTAL DEBTS \$ | | | \$ | \$ | \$ |

Complete the following information about both the applicant and joint applicant of other person (if applicable):

Are you obligated to make Alimony, Support or Maintenance Payments? No Yes Amount per month \$ _____
 If yes, to who? (Name & Address) _____
 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? _____ Amounts: \$ _____
 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.

Collateral Description:

Comments (for bank use only):

SIGNATURES: I/we certify that everything that I/we 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/we authorize you to check my credit and employment history and to answer questions others may ask you about my/our credit record with you. I/we understand that I/we must update credit information at your request or if my/our financial condition changes.

Signature of applicant _____ Date _____ Other Party’s Signatures (Where Applicable) _____ Date _____

***** IMPORTANT INFORMATION about our Insurance Sales Practice *****

Please read this notice carefully and keep a copy for your records

Our bank will not condition the approval of your loan application on your purchase of any type of insurance product from our bank or any of our affiliates. If you choose to purchase an insurance product, you may do so from any insurance provider. Before purchasing, understand that life insurance products:

- Are not insured by the FDIC, NCUSIF, or any other government agency
- Are not deposits or obligations of, or guaranteed by Jersey State Bank
- In the case of an insurance product that involves an investment risk, there is a risk associated with the product, including possible loss of value.

I/we have read this disclosure and understand its contents, as evidenced by my/our signatures below. Unless these disclosures are provided electronically or I have applied for credit by mail, I/we also acknowledge that you have provided these disclosures to me/us orally. I/we understand that this acknowledgment will be made a permanent part of my/our loan application.

Signature of applicant _____ Date _____ Other Party’s Signatures (Where Applicable) _____ Date _____