

CONSUMER CREDIT APPLICATION

TYPE OF CREDIT REQUESTED <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured <input type="checkbox"/> Individual Credit - relying on my income or assets. <input type="checkbox"/> Individual Credit - relying on my income or assets as well as income or assets from other sources. <input type="checkbox"/> Joint Credit Initial: _____	RIVER TOWN BANK ATTN: _____ P.O. BOX 577 • DARDANELLE, AR 72834 Loan Origination Company Identifier Loan Originator ID 789 466	Date of Application _____ Amount \$ _____ How Long _____ Payment Date Desired _____ Want to repay <input type="checkbox"/> Monthly <input type="checkbox"/> _____ Purpose _____ Acct. No. _____ Class _____
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SECURED CREDIT

Complete only if credit is to be secured. Briefly describe the property to be given as security and indicate if others have an ownership interest.

Property Description: _____
 Names & Addresses of all co-owners of the property: _____

BORROWER

Name	DOB	Age	School Yrs _____
Present Address	No. Years _____	Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Street _____			
City / State / Zip _____			
Former address if less than 2 years at present address			
Street _____			
City / State / Zip _____			
Years at former address			
		Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Separated	DEPENDENTS OTHER THAN LISTED BY CO-BORROWER	
	<input type="checkbox"/> Unmarried (incl. single, divorced, widowed)	NO.	AGES
Name and Address of Employer		Years employed in this line of work or profession? _____ years	
		Years on this job _____	
		<input type="checkbox"/> Self Employed*	
Position/Title	Type of Business		
Social Security Number***	Home Phone	Business Phone	

CO-BORROWER

Name	DOB	Age	School Yrs _____
Present Address	No. Years _____	Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Street _____			
City / State / Zip _____			
Former address if less than 2 years at present address			
Street _____			
City / State / Zip _____			
Years at former address			
		Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Separated	DEPENDENTS OTHER THAN LISTED BY CO-BORROWER	
	<input type="checkbox"/> Unmarried (incl. single, divorced, widowed)	NO.	AGES
Name and Address of Employer		Years employed in this line of work or profession? _____ years	
		Years on this job _____	
		<input type="checkbox"/> Self Employed*	
Position/Title	Type of Business		
Social Security Number***	Home Phone	Business Phone	

GROSS MONTHLY INCOME

Item	Borrower	Co-Borrower	Total
Base Empl. Income	\$ _____	\$ _____	\$ _____
Overtime			
Bonuses			
Commissions			
Dividends/Interest			
Net Rental Income			
Other ↑ (Before completing, see notice under Describe Other Income below)			
Total	\$ _____	\$ _____	\$ _____

LEAVE THIS SPACE BLANK FOR LENDER USE

DESCRIBE OTHER INCOME

<input type="checkbox"/> B - Borrower <input type="checkbox"/> C - Co-Borrower	NOTICE: Alimony, child support, or separate maintenance income need not be revealed if the Borrower or Co-Borrower does not choose to have it considered as a basis for repaying this loan.	Monthly Amount
		\$ _____
		\$ _____

IF EMPLOYED IN CURRENT POSITION FOR LESS THAN TWO YEARS, COMPLETE THE FOLLOWING

B/C	Previous Employer / School	City / State	Type of Business	Position / Title	Dates From / To	Monthly Income
						\$ _____

THESE QUESTIONS APPLY TO BOTH BORROWER AND CO-BORROWER

If a "yes" answer is given to a question in this column, please explain on an attached sheet.	Borrower Yes or No	Co-Borrower Yes or No	Are there any outstanding judgments against you? _____ Have you been declared bankrupt within the past 7 years? _____ Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years? _____ Are you a party to a law suit? _____ Are you obligated to pay alimony, child support, or separate maintenance? _____ Is any part of the down payment borrowed? _____ Are you a co-maker or endorser on a note? _____	Borrower Yes or No	Co-Borrower Yes or No	Are you a U.S. citizen? _____ If "no" are you a resident alien? _____ If "no" are you a non-resident alien? _____ Explain Other Financing or Other Equity (if any). _____ _____ Name & Address of Nearest Relative Not Living With You. _____ _____
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This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried co-borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise separate Statements and Schedules are required. If the co-borrower section was completed about a spouse, this statement and supporting schedules must be completed about that spouse also.

Completed Jointly

Not Completed Jointly

ASSETS

LIABILITIES AND PLEDGED ASSETS

Indicate by (*) those liabilities or pledged assets which will be satisfied upon sale of real estate owned or upon refinancing of subject property.

STATEMENT OF ASSETS AND LIABILITIES

Description	Cash or Market Value	Creditors' Name, Address and Account Number	Acct. Name If Not Borrower's	Mo. Pmt. and Mos. Left to Pay	Unpaid Balance
Cash Deposit Toward Purchase Held By	\$	Installment Debts (Include "revolving" charge accounts and rental expense)		\$ Pmt/Mos.	\$
		Co. Acct. No.			
Checking and Savings Accounts (Show Names of Institutions - Account Numbers) Bank, S & L or Credit Union		Addr. City		/	
		Co. Acct. No.			
Addr. City		Addr. City		/	
Acct. No.		Co. Acct. No.			
Bank, S & L or Credit Union		Addr. City		/	
		Co. Acct. No.			
Addr. City		Addr. City		/	
Acct. No.		Co. Acct. No.			
Bank, S & L or Credit Union		Co. Acct. No.		/	
Addr. City		Addr. City		/	
Acct. No.		Other Debts including Stock Pledges		/	
Stocks and Bonds (No./Description)				/	
		Real Estate Loans	Acct. No.		
		Co. Addr. City			
Life Insurance Net Cash Value Face Amount \$		Co. Acct. No.			
Subtotal Liquid Assets		Addr. City			
Real Estate Owned (enter Market Value from schedule of Real Estate Owned)		Automobile Loans	Acct. No.		
Vested Interest in Retirement Fund		Co. Addr. City		/	
Net worth of Business Owned (ATTACH FINANCIAL STATEMENT)		Co. Acct. No.		/	
Automobiles Owned (Make and Year)		Addr. City		/	
Furniture and Personal Property		Alimony/Child Support/Separate Maintenance Payments Owed to		/	
Other Assets (Itemize)				/	
		Total Monthly Payments		\$	
Total Assets	A \$	Net Worth (A minus B) \$		Total Liabilities	B \$

SCHEDULE OF REAL ESTATE OWNED (If Additional Properties Owned Attach Separate Schedule)

Address of Property (Indicate S if Sold, PS if Pending Sale or R if Rental being held for income)	Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Taxes, Ins. Maintenance and Misc.	Net Rental Income
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

SIGNATURES: 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 credit information at your request if my financial condition changes.

Borrower's Signature

Date

Co-Borrower's Signature (Where Applicable)

Date