



3649 Leopard Street
361/888-4451

Account Number
Census Tract

IB 1035 (R 9/05)

CONSUMER LOAN APPLICATION

LOAN REQUEST

PURPOSE OF LOAN

AMOUNT REQUESTED \$

MONTHS NEEDED

PERSONAL INFORMATION

This application is designed to be completed by the applicant(s) with the lender's assistance.

The Co-Applicant section and all other Co-Applicant questions should be completed to the extent possible if: (1) Co-Applicant will be jointly obligated with you on the loan; (2) you will be relying on income or assets of the Co-Applicant as a basis for repayment of the loan; (3) you are relying on income from alimony, child support or separate maintenance from the Co-Applicant or other party; or (4) you are married to the Co-Applicant and reside in, or the property is located in a community property State. If you are married, your spouse need not be jointly obligated with you on the loan and need not sign as a Co-Applicant unless item (2) above applies or unless the spouse's signature is required under state law to create a valid lien, pass clear title or waive inchoate rights to property.

Check Appropriate Box:

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested only complete the "applicant" section.
If you are applying for joint credit with another person, complete both "applicant" and "co-applicant" sections and sign below.

We intend to apply for joint credit.

Applicant

Co-Applicant

Form with columns for APPLICANT and CO-APPLICANT. Includes sections for Full Name, D.O.B., Present Address, Previous Address, Marital Status, Dependents, Social Security No., Name and Address of Employer, Type of Business, Position/Title, Previous Employer, and various financial/credit questions.

IF SELF EMPLOYED, PLEASE SUBMIT BALANCE SHEET, PROFIT AND LOSS STATEMENT, AND COPY OF LATEST FEDERAL TAX RETURN

ASSETS

Table with columns for DEPOSITS IN CHECKING & SAVINGS ACCOUNTS, AMOUNT OR VALUE, Personal Property - Furniture, Art, Jewelry, etc, Stocks-Bonds, Real Estate Owned, and TOTAL ASSETS.

LIABILITIES - OBLIGATIONS - CREDIT REFERENCES

NOTE: LIST ALL PERSONAL TRUST, PARTNERSHIP, OR CORPORATE DEBTS. IF RECENTLY PAID OFF, LIST FOR CREDIT REFERENCE. INCLUDE DEBTS FOR 1ST AND 2ND LIEN LOANS (MORTGAGE OR TRUST DEED), AUTOS, APPLIANCES, FURNITURE, PERSONAL LOANS AND NOTES, CO-SIGNED NOTES, ALIMONY, SUPPORT PAYMENTS, AND CHARGE ACCOUNTS.

Table with columns for PURPOSE, OWED TO (NAME & ADDRESS), ACCOUNT NUMBER, MONTHLY PAYMENT, BALANCE OWED, Pay Out Of Loan, and TOTAL LIABILITIES.

1) ATTACH ADDITIONAL LIST IF MORE SPACE NEEDED.
2) IF ANY OBLIGATION IS PAST DUE, ATTACH LETTER OF EXPLANATION.

REAL ESTATE OWNED

ADDRESS OF RESIDENCE PROPERTY		MORTGAGE HOLDER		ADDRESS OF MORTGAGE HOLDER		ACCOUNT NUMBER
PRESENT VALUE	DATE PURCHASED	PURCHASE PRICE	BALANCE FINANCED	MONTHLY PAYMENT	PRESENT BALANCE	

INSURANCE

(A)-Applicant: (CA)-Co-Applicant: (JT) Jointly

LIFE INSURANCE - COMPANY NAME AND ADDRESS	↓	TYPE	FACE AMOUNT	CASH VALUE

INSURANCE ON AUTOMOBILE	Carrier:	Policy #:
Agent:	Address:	Phone:

PERSONAL REFERENCES

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU	OR PERSONAL REFERENCE	RELATIONSHIP	ADDRESS	CITY	STATE	PHONE

PERSONAL CASH FLOW STATEMENT

INCOME REMARKS - Note: Income from Alimony, Child Support or Maintenance Payments need not be disclosed unless their consideration is desired. _____

	Monthly	Yearly	Projected Next Year
INCOME			
Salary/Wages	_____	_____	_____
Bonus/Commissions	_____	_____	_____
Dividends/Interest	_____	_____	_____
Trust Income	_____	_____	_____
Rentals/R.E. Income (net of expenses)	_____	_____	_____
Royalties	_____	_____	_____
Capital Gains	_____	_____	_____
Equipment Leases	_____	_____	_____
Gifts/Inheritances	_____	_____	_____
Legal/Insurance Settlements	_____	_____	_____
Tax Refund	_____	_____	_____
Spouse Income	_____	_____	_____
Other	_____	_____	_____
TOTAL INFLOWS	_____	_____	_____
EXPENSES			
Housing (Mortgage Payment or Rent)	_____	_____	_____
Automobile Payment	_____	_____	_____
Other Loan Payments	_____	_____	_____
Credit Card Payments	_____	_____	_____
Insurance Payments (Car, Home, Life, Health)	_____	_____	_____
Property Taxes (if not incl. in Mtg. Pmt.)	_____	_____	_____
Electric/Gas bill (Average)	_____	_____	_____
Phone Bill (Average)	_____	_____	_____
Gasoline	_____	_____	_____
Groceries (Average)	_____	_____	_____
Child Support	_____	_____	_____
Child Care	_____	_____	_____
Other Living Expenses	_____	_____	_____
TOTAL MONTHLY EXPENSES	_____	_____	_____
*NET CASH FLOW	_____	_____	_____

AGREEMENT

The undersigned hereby declare and represent that they have read the foregoing Application, that all statements made therein are complete and true to their knowledge, that all financial and credit information of value to the consideration of this Loan Request has been given and that the statements are made and information given as an inducement to the Lender to grant the Loan for which this Application is made. The Applicant(s) authorize the Lender, or his Agent, to verify the information contained herein and to make such additional normal inquiries as reasonably may be related to or associated with this Application, from credit bureaus and from employers, creditors, and references listed on this application, and agree that such information, along with this Application, shall remain the Lender's property.

The undersigned understand that the selection of a dealer or contractor is their responsibility and that this financial institution in no way guarantees equipment, materials or workmanship and that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of above facts, as applicable under the provisions of Title 18, United States Code, Section 1014.

Accepted:

Applicant _____ Date _____	Applicant _____ Date _____
Driver's License No. _____	Driver's License No. _____

CUSTOMER/APPLICANT
IDENTIFICATION FORM

APPLICANT

Name

Address

(Physical Address, 911 Address or directions if above is a PO Box #)

City, State, Zip Code

Email Address

Date of Birth

Social Security # or TIN #

SSN Issue Date

ID#

ID Issuer (State)

ID Issue Date

ID Expiration Date

Verified by:

Initials

CUSTOMER/APPLICANT
IDENTIFICATION FORM

CO-APPLICANT

Name

Address

(Physical Address, 911 Address or directions if above is a PO Box #)

City, State, Zip Code

Email Address

Date of Birth

Social Security # or TIN #

SSN Issue Date

ID#

ID Issuer (State)

ID Issue Date

ID Expiration Date

Verified by:

Initials

**CREDIT APPLICATION DISCLOSURE FOR
INSURANCE/ANNUITY PRODUCTS**

VALUEBANK TEXAS
3649 Leopard
CORPUS CHRISTI, Texas 78408
(361)888-4451

LOAN NUMBER	DISCLOSURE DATE	

APPLICANT INFORMATION

IMPORTANT NOTICE

DO NOT SIGN THIS FORM UNTIL YOU READ IT AND UNDERSTAND ITS CONTENTS

Insurance and/or annuity products may be solicited, offered or sold in connection with the type of credit for which you have applied. We cannot, as a condition for you to obtain the credit:

- require you to purchase an insurance product or annuity from us, or from any of our affiliates; or
- make you agree not to obtain, or prohibit you from obtaining, an insurance product or annuity from another company that is not affiliated with us.

INSURANCE/ANNUITY PRODUCTS DISCLOSURE

Any insurance product or annuity that you may agree to purchase from us or our affiliates:

- is not a deposit or other obligation of ours, or our affiliates; and
- is not guaranteed by us or our affiliates; and
- is not insured by the Federal Deposit Insurance Corporation (FDIC) or any other agency of the United States (with the exception of any federal crop insurance or federal flood insurance); and
- is not insured by us or our affiliates, and
- if the insurance product or annuity that you agree to purchase from us or our affiliates involves investment risk, this risk includes the possible loss of value and principal.

ACKNOWLEDGMENT. Each undersigned Applicant hereby acknowledges receipt of this Credit Application Disclosure For Insurance/Annuity Products on the date indicated below, and has read and understood its contents.

Signatures are set forth below.

--

CERTIFICATION. The undersigned hereby certifies that on behalf of the Lender he/she orally provided the above disclosures to the Applicant(s) on the date noted below.

VALUEBANK TEXAS

By: _____ Date _____
Its:

--

Initials

VALUEBANK TEXAS
3649 LEOPARD
CORPUS CHRISTI, TEXAS 78408
361-888-4451

YOUR PRIVACY IS IMPORTANT TO US

PRIVACY DISCLOSURE

You provide important information about yourself to a variety of businesses and organizations. The same is true when you do business with our financial institution. You are asked to provide us with certain personal information that helps us give you better service and complete your transactions more effectively. We work diligently to safeguard the information you give to us. In fact, we developed the following policies to ensure your confidentiality and maintain your confidence in our institution. These policies detail the strict standards we have in place. For this reason we ask that you please read the following information carefully.

INFORMATION WE COLLECT ABOUT YOU

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms,
- Information about your transactions with us, our affiliates, or others,
- Information we receive from a consumer-reporting agency
- Information we receive as a result of verifying customer information.

NO DISCLOSURES OUTSIDE OF EXCEPTIONS

We do not disclose any nonpublic personal information about our customers or **former** customers to anyone, except as permitted by law.

CONFIDENTIALITY AND SECURITY

We restrict access to nonpublic personal information about you to those employees who need to know that information to provide products or services to you.

We maintain physical, electronic, and procedural safeguards that comply with federal standards to guard your nonpublic personal information.

HOW TO FILE A COMPLAINT

We are chartered, licensed and/or registered under the laws of the State of Texas and by state law are subject to regulatory oversight by the Texas Department of Banking. Any consumer wishing to file a complaint against us should contact the **Texas Department of Banking** through one of the means indicated below:

In Person or by U.S. Mail:	2601 North Lamar Boulevard, Suite 300 Austin, Texas 78705-4294
By telephone:	(877)276-5544
By Fax:	(512)475-1313
By E-Mail:	consumer.complaints@banking.state.tx.us
Via the Internet Website:	www.banking.state.tx.us