

Savings Bank of Walpole Consumer Loan Application

USA PATRIOT ACT NOTICE: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. When you open an account, we will ask for your name, street address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Date	Amount Requested	Term (Length of Loan)	Payment Date Requested		
	\$				
Purpose of Loan – describe how the proceeds will be used.					
<input type="checkbox"/> Purchase Automobile <input type="checkbox"/> Purchase Motorcycle <input type="checkbox"/> Refinance Automobile <input type="checkbox"/> Refinance Motorcycle <input type="checkbox"/> Purchase Boat/Recreational Vehicle <input type="checkbox"/> Purchase Household Goods		<input type="checkbox"/> Home Improvement <input type="checkbox"/> Medical Needs <input type="checkbox"/> Consolidate Debt <input type="checkbox"/> Other (specify): _____			
Type of Collateral – describe the type of collateral offered and how owned					
<input type="checkbox"/> Car, Boat, RV or Motorcycle: Year _____ Make & Model _____ <input type="checkbox"/> Savings or Certificate of Deposit: Account Number _____		<input type="checkbox"/> Unsecured <input type="checkbox"/> Other (describe): _____			
Information regarding applicant(s) – do not complete Joint Applicant information if you are applying for individual credit in your own name and are relying on your own income and assets and not the income or assets of another person as the basis for repayment of the credit requested.					
Applicant's Name		Joint Applicant's Name For joint credit initial here			
		[/ /]			
Social Security Number	Home Phone	Birth Date	Social Security Number		
	Cell Phone		Home Phone		
			Cell Phone		
Present Address (street, city, zip) <input type="checkbox"/> Own <input type="checkbox"/> Rent ____ No. Yrs		Present Address (street, city, zip) <input type="checkbox"/> Own <input type="checkbox"/> Rent ____ No. Yrs			
email address:		email address:			
<i>If residing at present address for less than two years, complete the following:</i>					
Former Address (street, city, zip) ____ No. Yrs		Former Address (street, city, zip) ____ No. Yrs			
Name & Address of Employer <input type="checkbox"/> Self Employed ____ Yrs. on this job		Name & Address of Employer <input type="checkbox"/> Self Employed ____ Yrs. on this job			
Position/Title/Type of Business		Position/Title/Type of Business			
Business Phone		Business Phone			
<i>If employed in current position for less than two years or if currently employed in more than one position, complete the following:</i>					
Former Employment <input type="checkbox"/> Self Employed ____ Yrs. in profession		Former Employment <input type="checkbox"/> Self Employed ____ Yrs. in profession			
Name & Address of Nearest Relative Not Living w/ You		Name & Address of Nearest Relative Not Living w/ You			
Phone		Phone			
Relationship		Relationship			
Are you a U.S. Citizen?		Relationship to Applicant: _____			
If no, are you a resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, are you a non-resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, are you a resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you a co-maker, endorser or guarantor on any loan? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, are you a non-resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any unsatisfied judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a co-maker, endorser or guarantor on any loan? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you obligated to pay child support or alimony? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are there any unsatisfied judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, amount per month: \$ _____		Are you obligated to pay child support or alimony? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been declared bankrupt within the past 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, amount per month: \$ _____			
If yes, where? _____ Year: _____		Have you been declared bankrupt within the past 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, where? _____ Year: _____		If yes, where? _____ Year: _____			
Gross Monthly Income:	Applicant	Joint Applicant(s)	Notice: 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.		
Salary and Wages					
Other (see notice and list in "describe other income")					
Total	\$	\$			
Description of Assets:		Value	Outstanding Debts (list all indebtedness to individuals or other creditors, housing expense, etc.)	Balance	Monthly Payment
Cash (Name of Financial Institutions):		\$	<input type="checkbox"/> Rent <input type="checkbox"/> Mortgage		\$
Automobiles (Make Model Year):					
Signatures – I certify that everything I have stated in this application and on any attachments is correct. Lender may keep this application whether or not it is approved. By signing below I authorize Lender to obtain my credit report and verify employment history and to answer questions others may ask Lender about my credit record with Lender. I understand that I must update credit information at Lender's request if my financial condition changes. Joint applicant's signature below reflects the intent to apply for joint credit and be obligated for repayment of the loan if granted.					
Applicant's Signature		Date	Joint Applicant's Signature	Date	



Fair Credit Reporting Act and Credit Report Authorization

I/We hereby authorize and acknowledge that Merrimack County Savings Bank, Meredith Village Savings Bank, and Savings Bank of Walpole affiliated through New Hampshire Mutual Bancorp, may verify or re-verify any information contained in this request for credit or obtain other information or data related to this request, for legitimate business purposes through other sources, including but not limited to a consumer reporting agency.

The information that is obtained by Savings Bank of Walpole is only to be used for the purpose of obtaining a credit decision and any necessary post-closing quality control reviews for this request for credit.

I/We also hereby expressly consent and authorize Savings Bank of Walpole to share information, including credit reports and other information bearing on my/our credit worthiness, with New Hampshire Mutual Bancorp, Meredith Village Savings Bank and Merrimack County Savings Bank in pursuit of the approval of my/our loan application.

I/We further authorize and acknowledged that New Hampshire Mutual Bancorp may also be acting as agent on behalf of its affiliates banks in obtaining credit reports for all applicants in my loan request and may appear on my credit report as an inquiry.

BORROWER #1 _____ Date _____

Email Address: _____ Cell# _____

BORROWER #2 _____ Date _____

Email Address: _____ Cell# _____



IMPORTANT CREDIT APPLICATION DISCLOSURE

You are applying for credit from us. In connection with your application for credit, the Bank may be soliciting, offering to sell, or may sell you an insurance product or annuity.

Federal law requires Lenders to inform you of the following:

- Savings Bank of Walpole, as a condition of granting you credit, cannot require that you purchase an insurance product from the bank or its affiliates.
- Savings Bank of Walpole, as a condition of granting you credit, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.

BY SIGNING THIS DISCLOSURE, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.

Unless this disclosure is provided electronically, or applied in person or by telephone or by mail, I also acknowledge that you have provided this disclosure to me orally.

Borrower's Signature

Date

Co-Borrower's Signature

Date



CUSTOMER IDENTIFICATION NOTICE

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

By executing this form, you acknowledge that you are required to provide valid photo documentation acceptable to enable us to verify your identity, comply with the provisions of the Bank Secrecy Act, as amended by the USA Patriot Act, and complete the processing of your loan application and that you agree to provide the identifying documents requested.

By signing below, you are certifying that you have read and understand all the above information.

Signature of Applicant

Date

Signature of Applicant

Date