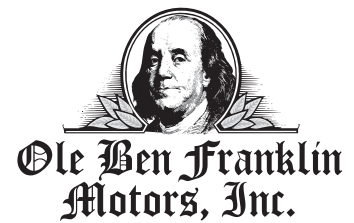


ATTN: Robert Latsha



# LOAN APPLICATION

Applying as Individual or with Co-Signer?  Individual Applicant  Co-Applicants

## APPLICANT INFORMATION

NAME		SSN #	
ADDRESS	CITY	STATE	ZIP
PHONE	FAX	E-MAIL	
DOB	DRIVERS LICENSE #		
CURRENT RESIDENCE	<input type="checkbox"/> < 2 years	<input type="checkbox"/> > 2 years	MONTHLY PAYMENT
<input type="checkbox"/> Rent	<input type="checkbox"/> Mortgage	<input type="checkbox"/> Live w/ Relative	

## CURRENT EMPLOYER INFORMATION

COMPANY NAME	COMPANY PHONE	
JOB START DATE	JOB TITLE	GROSS INCOME

## PREVIOUS EMPLOYER INFORMATION

COMPANY NAME	COMPANY PHONE
JOB START DATE	JOB END DATE

## CO-APPLICANT INFORMATION

NAME		SSN #	
ADDRESS	CITY	STATE	ZIP
PHONE	FAX	E-MAIL	
DOB	DRIVERS LICENSE #		
CURRENT RESIDENSE	<input type="checkbox"/> < 2 years	<input type="checkbox"/> > 2 years	MONTHLY PAYMENT
<input type="checkbox"/> Rent	<input type="checkbox"/> Mortgage	<input type="checkbox"/> Live w/ Relative	

## CURRENT EMPLOYER INFORMATION

COMPANY NAME	COMPANY PHONE	
JOB START DATE	JOB TITLE	GROSS INCOME

## PREVIOUS EMPLOYER INFORMATION

COMPANY NAME	COMPANY PHONE
JOB START DATE	JOB END DATE

## STATEMENT OF CONSENT

I certify that the information provided by me is correct. I also understand that you will be checking with credit reporting agencies. I authorize an investigation of my credit and employment history and the release of information about my credit experience.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
CO-APPLICANT SIGNATURE

FAX THIS APPLICATION TO (865) 694-0873 • ATTENTION: JIM BAKER