

295 Main Street, North Easton, MA 02356  
 Connecting all offices: 508-238-2007



**CONSUMER LOAN APPLICATION**  
 Fax: 508-238-3909

Date:	Amount Requested: \$	Purpose:	Loan Term in Months:	APR	
<b>Applicant Name</b>		Social Security Number	Date of Birth		
Home Address		How Long?			
Mailing Address if different					
<input type="checkbox"/> own	<input type="checkbox"/> rent	Monthly Payment \$	Mortgage Holder/Landlord		
Home Telephone		Cell Telephone	Work Telephone		
Employer Name and Address					
Check if self-employed <input type="checkbox"/>					
Position	How Long:	Gross Income	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually		
Other income you would like us to consider: Source Amount: \$					
Income from alimony, child support, or separate maintenance need not be revealed unless you wish to have it considered.					
Previous Employer if less than 3 years at current employer					
Previous Address if at current address less than 2 years					
Name and address of nearest relative not currently living with you			Telephone		
<b>Co-Applicant Name</b>		Social Security Number	Date of Birth		
Home Address		How Long?			
Mailing Address if different					
<input type="checkbox"/> own	<input type="checkbox"/> rent	Monthly Payment \$	Mortgage Holder/Landlord		
Home Telephone		Cell Telephone	Work Telephone		
Employer Name and Address					
Check if self-employed <input type="checkbox"/>					
Position	How Long:	Gross Income	<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually		
Other income you would like us to consider: Source Amount: \$					
Income from alimony, child support, or separate maintenance need not be revealed unless you wish to have it considered.					
Previous Employer if less than 3 years at current employer					
Previous Address if at current address less than 2 years					
Name and address of nearest relative not currently living with you			Telephone		
<b>Outstanding Loans and Credit Cards</b>					
<b>Creditor</b>	<b>Payment</b>	<b>Balance</b>	<b>Creditor</b>	<b>Payment</b>	<b>Balance</b>

**√ I UNDERSTAND THAT I AM BEING OFFERED PAYMENT PROTECTION FOR THIS LOAN. MY DECISION TO ACCEPT OR DECLINE WILL NOT AFFECT MY ABILITY TO OBTAIN CREDIT. IF OTHER INSURANCE COVERS THE RISK, YOU MAY NOT WANT OR NEED CREDIT INSURANCE.**

I choose Credit Life: **Applicant** \_\_\_\_\_ **Co-Applicant** \_\_\_\_\_ I choose Disability Coverage: **Applicant** \_\_\_\_\_  
 I understand the benefits of payment protection and decline the coverage on this loan: **Applicant** \_\_\_\_\_ **Co-Applicant** \_\_\_\_\_  
 If no choice is indicated with initials, payment protection will not be issued.

- √ Check Appropriate Box**
- If you are applying for an individual account in your own name and 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.
  - If you are applying for a joint account that you and another person will use.  
 We intend to apply for joint credit: **Applicant** \_\_\_\_\_ **Co-Applicant** \_\_\_\_\_
  - You are applying for an individual account, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested. Please provide information about the person on whose alimony, support or maintenance payments or income or assets you are relying.

I hereby apply to North Easton Savings Bank for a loan. You are authorized to check my credit and employment. I am eighteen years of age or older.

**√ Applicant's Signature** \_\_\_\_\_ **√ Co-Applicant's Signature** \_\_\_\_\_