Credit Application

			funding of terrorism an requires all financial ins that identifies each per What this means for yo account, we will ask for information that will all your driver's license or we may use outside so you provide is protecte	d money laundering activ stitutions to obtain, verify son who applies for a loo ou. When you apply for a or your name, address, d or you to identify you. W other identifying docum	y, and record information an or opens an account. I loan or open an ate of birth and other /e may also ask to see ents. In some instances, ormation. The information nd federal law.	
				For Creditor Use		
	Creditor		Account No.	Class No.	Date Received	
("You" means	Applicant, <i>et al</i> ; and "We					
Charles and a surge of the		1. Type of	Application			
Check only <u>one</u> of the	e <i>three types:</i> You are relying <u>solely</u> on γ	our income or assets.	Joint Credit - By initi	aling below, you intend t	o apply for "joint credit".	
	You are relying on your in as income or assets from		Applicant	Joint Applic	cant	
			quested Credit	oonit Applic	Jan	
Application Date	Amount	Financing Type	No. of Months	Repayment Interval	First Payment Date	
	\$	 New Refinance Modification 		Monthly		
Credit Type	Loan Purpose	Security for Credit	Proceeds of Credit to B	le Used for		
☐ Line of Credit	☐ Agricultural	Unsecured	□ To purchase propert	ty that will secure your o	redit	
□ Loan	□ Business	□ Secured			elling and is not real estate	
□ Sale	□ Consumer			•		
□ Lease			 To finance home improvements to a residential dwelling Other (<i>describe</i>): 			
Applicant		3. Applicant	Information	Joint Applie	cant or Other Party	
Full Name (First, Midd	le, Last)		Full Name (First, Middle,		,	
Gov't ID Type	Gov't ID No.	Gov't ID Issued By	Gov't ID Type	Gov't ID No.	Gov't ID Issued By	
Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth	Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth	
Soc. Sec. No.	Primary Phone Cell	Second Phone Cell	Soc. Sec. No.	Primary Phone Cell	Second Phone Cell	
Email Address:			Email Address:			
Present Address 🗌	Own 🗌 Rent 🗌	No. of Yrs.:	Present Address 🛛 🤇	Own 🗌 Rent 🗌	No. of Yrs.:	
Previous Address 🛛	Own 🗆 Rent 🗆	No. of Yrs.:	Previous Address 🗆 🤉	Own 🗆 Rent 🗆	No. of Yrs.:	
Dependents No.:	Ages:		Dependents No.:	Ages:		
Nearest Relative (not	living with you)		Nearest Relative (not li	ving with you)		
			Name:			
Address:			Address:			
Telephone:		🗆 Cell	Telephone:		🗆 Cell	
Your Relationship to us (or our affiliate)			Your Relationship to us	s (or our affiliate)		
🗆 None 🗆 Empl	oyee 🛛 Insider (Shareh	older, Director, Officer)	🗆 None 🗆 Employ	vee 🛛 Insider (Shareh	older, Director, Officer)	
Have you ever received credit from us?			Have you ever received credit from us?			
If yes, when: office/branch:			If yes, when: office/branch:			

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If the "Joint Applicant	" or "Other Party" Section	4. Asset and ns were completed, this Sec			formation about both the Ap	oplicant, and	
Assets Owned	Other Party, if applicable.						
Type of Asset or Description	Account Number	Current Market Value	Remaining Balance of Lien (Enter "0" if none)		Asset Owner's Name	Asset Owner's Name	
2.000.10100		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
		\$	\$				
Amounts from Continuation Form		\$	\$				
Total Assets		\$	\$				
Outstanding Debts	S (This section should be Type of Debt, or	charge accounts, installment	t contracts, credit Present		ages and other obligations.) Debtor's Name	Past Due	
	Account Number	Original Amount	Balance	Monthly Payment		(Yes/No)	
Landlord	☐ Rent Payment			\$			
	☐ Mortgage	\$	\$	\$			
		\$	\$	\$			
		ş	\$	\$			
		ş	\$	\$			
		ş	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
Amounts from Continuation Form		\$	\$	\$			
Total Debts		\$	\$	\$			
Credit References - N	ame		Original Amo	unt Borrowed	Date Paid in Full		
			\$				
			\$				
1			\$				

Applicant	5. Employme	nt Information	Joint Applicant or Other Party		
1st Employer:	evious Self No. of Yrs.:	1st Employer: Current Name:	□ Previous □ Self No. of Yrs.:		
Address:		Address:			
Mgr.: Pho	one:	Mgr.:	Phone:		
Gross Monthly Salary/Comm.: \$ Position/Title:		Gross Monthly Salary/Comr Position/Title:			
2nd Employer: Current Pre Name:	evious 🗆 Self No. of Yrs.:	2nd Employer: Current Name:	□ Previous □ Self No. of Yrs.:		
Address:		Address:			
Mgr.: Pho Gross Monthly Salary/Comm.: \$ Position/Title:	one:	Mgr.: Gross Monthly Salary/Comr Position/Title:	Phone: n.: \$		
3rd Employer : Current Pre Name:	evious 🗆 Self No. of Yrs.:	3rd Employer: Current Name:	□ Previous □ Self No. of Yrs.:		
Address:		Address:			
Mgr.: Pho	one:	Mgr.:	Phone:		
Gross Monthly Salary/Comm.: \$ Position/Title:		Gross Monthly Salary/Comr Position/Title:	n.: \$		
Applicant	6. Othe	er Income	Joint Applicant or Other Party		
Alimony, child support, or separate revealed if you do not wish to have this obligation.	maintenance income <u>need not</u> be it considered as a basis for repaying	Alimony, child support, or s revealed if you do not wish this obligation.	separate maintenance income <u>need not</u> be to have it considered as a basis for repaying		
Alimony, child support, separate ma	aintenance received under: nent 🗌 Oral understanding	Alimony, child support, separate maintenance received under: Court order Vritten agreement Oral understanding			
Other Income: \$ per Month		Other Income: \$ per Month			
Source:		Source:			
Is any income listed in Sections 4, sections 4, sections 4, sections 4, sections 4, section 4, sect	5 or 6 likely to be reduced before the	Is any income listed in Sect credit is paid off:	ions 4, 5 or 6 likely to be reduced before the		
□ Yes (Explain in section 10.)	No	□ Yes (Explain in section 10.) □ No			
Applicant		Obligations	Joint Applicant or Other Party		
☐ Yes ☐ No If yes,	Are you a co-maker, endor		□ Yes □ No If yes,		
Amount: \$	guarantor on any loan, con	tract or other obligation?	Amount: \$		
For whom:			For whom:		
To whom:		· · · · · · · · · · · · · · · · · · ·	To whom:		
☐ Yes ☐ No If yes,	Are there any unsatisfied j				
Amount per month: \$ To whom:			Amount per month: \$ To whom:		
		nkrupt in the last 10 years? Where:			
Year:			Year:		
☐ Yes ☐ No If yes, Are you obligated to make Amount per month: \$ Maintenance Payments?		Alimony, Support or	□ Yes □ No If yes, Amount per month: \$		
To whom:			To whom:		
		mation (if secured)			
□ Boat or Vessel	Description		Property Location and Address		
Certificate of Deposit					
Deposit Account					
 Manufactured Home Motor Vehicle 					
	ential Dwelling 🛛 Homestead F	roperty			
	Owner(s) Names & Addresses	<i>.</i>			
☐ Agricultural☐ Business					
Consumer					

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Applicant		9. Marita	al Status	Joint Applie	cant or Other Party
Leave blank, unless:			Leave blank, unless:		
(1) the credit will be se (2) vou reside in a corr	ecured, or nmunity property state, or		 (1) the credit will be secure (2) you reside in a communication 		or
(3) you are relying on p	property, located in a comm	nunity property	(3) you are relying on prop	perty, located in a co	
state, as a basis fo	r repayment.		state, as a basis for re □ Married	epayment.	
Separated			Separated		
Unmarried (including	g single, divorced, widowed)		Unmarried (including si	ngle, divorced, widow	ed)
	1	0. Additional Inform	ation or Explanations		
		11 N	otices		
California Besidents - F	ach applicant, if married, n				
	•• •		ith your application. Upon y	our request we will	inform you whether or
not a report was ordere	ed. If a report was ordered,	we will tell you the nar	me and address of the consu	umer reporting agend	y that provided the
	1		an update, renewal or exten		,
Ohio Residents. The Oh	nio laws against discriminat es maintain separate credit	ion require all creditors histories on each individ	make credit equally availabl dual upon request. The Ohio	e to all creditworthy Civil Rights Commis	customers, and that
compliance with this la	w.			-	
	intent to defraud or knowir ceptive statement is guilty		a fraud against an insurer, s	ubmits an applicatio	n or files a claim
	. ,		e proceeds of the extension	of oradit to rapay or	
	ead or debt to another lend			of credit to repay ar	
Wisconsin Residents. N	lotice to Married Applicant	s. No provision of any m	narital property agreement, u	unilateral statement (under Wisc. Statutes
§ 766.59 or a court de	cree under Wisc. Statutes	§ 766.70 adversely affe	ects the interests of the Cre	ditor unless the Cred	litor, prior to the time the
to the Creditor is incurr		nent, statement or decr	ee or has actual knowledge	of the adverse provi	sion when the obligation
For Married Wisconsin	Residents. The credit being	applied for, if granted,	will be incurred in the intere	est of my marriage o	r family. I understand
the Creditor may be rec	quired by law to give notice		<i>i</i>		
Varia a antificiate accompti			prizations and Signature		
			on any other documents su n contained in this Credit Ap		
materially changes or w approved.	ve make a request to you o	rally or in writing. You	understand that we will reta	in this Credit Applica	ition whether or not it is
	luest one or more consume	r reports, to check and	verify your credit and emplo	ovment history, and t	o answer questions
others may ask us about	ut our credit experience wit	h you.			
In order to provide you	with the best possible serv	rice in our ongoing busi lephone numbers or em	ness relationship with you, y ail addresses listed on this (ou acknowledge that Credit Application or	t we may contact you that you subsequently
provide us in connectio	n with your credit account	- regardless of whether	the telephone number we u	use is assigned to a p	baging service, cellular
			arrier service or any other s of voice, voicemail, or text n		
	ages or automatic telephon		ad this Cuadit Annliantian wi		mania aimaatumaa Mau
intend your electronic s	signature to have the effect	of your written ink sign	ed this <i>Credit Application</i> wi nature. You viewed and rea	d the entire Credit A	pplication and notices
before you signed it. Y	ou received a paper copy o	of this Credit Application	n after it was signed. You u	Inderstand that this (Credit Application is in
the electronic form that we will keep. We may rely on, and enforce, this <i>Credit Application</i> in the electronic form or as a paper version of the electronic form.					
				Dente Of	
Applicant Signature		Date	Joint Applicant, or Oth	er Party, Signature	Date
			(if applica	able)	
Notice: It is a federal crime punishable by fine, imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code § 1001, et seq.					
	provisions of The TO, Ull		ginator Information		
If this Credit Application	<i>n</i> is secured by a consume		hat is owned by you, we ma	ay be required under	federal or state law to
disclose our mortgage l	loan origination identification	n number(s), which are			
	n Originator Name and Ide				
Mortgage Loan Origination Company Name and Identifier: <i>For Creditor Use</i>					
Date Received	Received By	For Cred Date Action Taken	Action Taken By	Action Taken	Reason Code(s)
L					
Universal Credit Application					UCA 9/1/2022

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INSURANCE DISCLOSURE FOR CREDIT APPLICATION

Applicant:

Lender:

Putnam County Bank Main Street P.O. Box 308 Hurricane, WV 25526 (304) 562-5055

IMPORTANT

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

Purpose.

You have submitted an application for a loan. In connection with your loan application, Lender may be soliciting, offering to sell, or will sell you an insurance product or annuity. Federal law requires Lender to provide you with the following disclosures.

Credit Disclosures.

- 1. Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from Lender or any of its affiliates.
- 2. Lender, as a condition of granting you a loan, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.

Acknowledgment.

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

APPLICANT:

^		
	-	_

Applicant

Date

×___

Applicant

Date

JOINT APPLICATION ACKNOWLEDGMENT

Applicant:	Lender:	Putnam County Bank Main Street P.O. Box 308 Hurricane, WV 25526 (304) 562-5055	
We, the undersigned, intend to apply for joint credit.			
APPLICANT(S):			
XApplicant	Date		
X Co-Applicant	Date		

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