CONSUMER LOAN APPLICATION

Due to private data on this form, **DO NOT Email**. Fax to 610-948-9008, mail, or bring it to the address at the bottom of this page.

Call us for assistance: **610-948-9000**



\$							
Loan Amount Reques	ted	Purpose					
		OR	WE	are applying for J			
		Initials				Initials	Initials
		Please tell us	about you	ır self and co	applicant (if ap	oplicable.)	
APPLICANT:							
F	irst Name		M.I.	Last Name		Social Security Nur	mber Date of Birth
						_	/
Home Address	Cit	у		State	Zip Code	County	Years/Months
				/			
Home Phone Number	Dri	Driver's License Number		Number/Ages of Dependents		Applicant Email Add	dress
Previous Home Address	Cit	W		State	Zip Code	County	/ Years/Months
	·			Jidio	Zip Oode	County	i cai s/ivioi III is
Yes No Self Are you or a family member an active service member?		? <u> </u>	Service Member's Name		Relationship		
The year of a family mon	ibor arradiivo o			or vice interniber o	Traino	Troidilonip	
CO-APPLICANT:						_	
F	irst Name		M.I.	Last Name		Social Security Nur	mber Date of Birth
Home Address	Cit	у		State	Zip Code	County	Years/Months
U Divers Noveles		da Lita a a a Ma		/	-(Demonstrate	— Co Applicant Empl	Addraga
Home Phone Number Driver's License Number			Number/Ages of Dependents		Co-Applicant Email Address		
			Emplo	yment Inforr	nation		
APPLICANT:				Self Employed			/
E	mployer or Busin	ess Name		Additional inform	nation required.	Business Phone Numb	er Years/Months
							\$
Business Address (and Suite	e if applicable)	City		State	Zip Code	Position	Monthly Income
Previous Employer					Voors/Martha	<u> </u>	
Frevious Employer					Years/Months		
CO-APPLICANT:		_		Self Employed			/
E	mployer or Busin	ess Name		Additional inform	nation required.	Business Phone Numb	er Years/Months
							<u> </u>
Business Address (and Suite	e if applicable)	City		State	Zip Code	Position	Monthly Income
					/	<u></u>	
Previous Employer					Years/Months		

CONSUMER LOAN APPLICATION (Continued)

Other Income										
Do not include alimony, child support or separate maintenance income, unless you want us to consider it for the purposes of this application.										
·										
\$ Manthly C	\$	Mandah	Occurred Other Income							
Annual Interest & Monthly Cl Dividend Income Maintenan		Monthly chold Income	Source of Other Income							
Marital Status										
Do NOT complete this portion if this application is for individual, unsecured credit.										
APPLICANT: CO-APPLICANT:										
Married Separated Unmarried (Divorced or widowed.) Married Separated Unmarried (Divorced or widowed.)										
Existing Loans and Accounts										
Own home (in the following names:)				Rent home						
\$	\$	\$	\$							
Monthly Rent or Payment Purchase Price	Original Loan Amount	Balance Owing	Present Value	Date Purchased						
Name of Mortgage Holder or Landlord	Address	City	State	Zip Code						
			¢.							
Bank Name	Checking Account Number	Savings Account Number	\$	rt or Separate Maintenance						
Bank Name	Checking Account Number	Savings Account Number	імопітіў Спііа Зарро	n or Separate Maintenance						
Have you ever had a judgement filed again	nst you or declared bankruptcy?	Yes No	If yes:	(Please attach details)						
Date										
Name of nearest relative not living with you	u:									
Phone Number Relationship										
Address City	State	Zip Code								
Assets			Obligations							
Asset	Value	Description	Amount Owed	Monthly Payment						
Cash in Banks \$	Unsec	cured Bank Loans	\$	\$						
Stocks/Bonds \$	Secur	ed Bank Loans	\$	\$						
Automobiles \$	Auto I	oans	\$	\$						
Real Estate \$	Total	Real Estate Obligations	\$	\$						
Cash Value Life Insurance \$	Life Ir	surance Loans	\$	\$						
\$	Credit	Card Debt	\$	\$						
Face Value										
Retirement Funds/IRAs \$	Other	Obligations	\$	\$						
Other Assets \$		TOTAL OBLIGATIONS	\$							
Other Assets \$										
TOTAL ASSETS \$		NET WORTH	\$							
Please attach any additional information th	at will be helpful in approximation	r application								
			shown below. I/We authoriz	e The Victory Bank to obtain a						
I/We represent that this application is complete and fully reflects my/our financial condition on the date shown below. I/We authorize The Victory Bank to obtain a credit report and any other information it deems necessary about my/our credit worthiness. I/We agree to notify The Victory Bank immediately, in writing, of any										
adverse change in my/our financial condition. I/We understand that The Victory Bank will retain this application whether or not it is approved.										
Applicant's Signature	Date Co	o-applicant's Signature	Date							
For Bank Use Only: Is this secured by 1-4 Family Real Estate? Yes No										
									R	eceived By



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