



411 McMurray Road
Bethel Park, PA 15102-1131

Consumer Loan Application

BRANCH OFFICE _____

Individual Joint

We intend to apply for Joint Credit

Amount Requested _____ Term _____

Loan Type Home Equity Installment Loan Home Equity Line of Credit
 Other

Applicant _____ Date _____ Co-Applicant _____ Date _____

Purpose of Loan _____

NAME (Include Jr., Sr., III, if applicable) _____ DATE OF BIRTH _____

NAME (Include Jr., Sr., III, if applicable) _____ DATE OF BIRTH _____

SOCIAL SECURITY NUMBER _____

SOCIAL SECURITY NUMBER _____

PRESENT ADDRESS (No. & Street) _____ APT. NUMBER _____

PRESENT ADDRESS (No. & Street) _____ APT. NUMBER _____

CITY _____ STATE _____ ZIP _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ HOW LONG AT THE ABOVE ADDRESS? _____

TELEPHONE _____ HOW LONG AT THE ABOVE ADDRESS? _____

()

()

PREVIOUS ADDRESS (If less than 3 years at current address) _____

PREVIOUS ADDRESS (If less than 3 years at current address) _____

HOW MANY YEARS AT THIS ADDRESS? _____ DO NOT COMPLETE FOR UNSECURED LOANS
 MARRIED SEPARATED
 UNMARRIED (Incl. single, divorced, widowed) DEPENDENTS _____

HOW MANY YEARS AT THIS ADDRESS? _____ DO NOT COMPLETE FOR UNSECURED LOANS
 MARRIED SEPARATED
 UNMARRIED (Incl. single, divorced, widowed) DEPENDENTS _____

LIST ANY OTHER NAMES UNDER WHICH YOU HAVE APPLIED FOR OR BEEN GRANTED CREDIT: _____

LIST ANY OTHER NAMES UNDER WHICH YOU HAVE APPLIED FOR OR BEEN GRANTED CREDIT: _____

IS THIS YOUR PRIMARY ADDRESS? Yes No

IS THIS YOUR PRIMARY ADDRESS? Yes No

ADDRESS (No. & Street) _____

ADDRESS (No. & Street) _____

CITY _____ STATE _____ ZIP _____

CITY _____ STATE _____ ZIP _____

PURCHASE PRICE _____ ESTIMATED VALUE _____

PURCHASE PRICE _____ ESTIMATED VALUE _____

MORTGAGE HOLDER _____ BALANCE ON MORTGAGE _____

MORTGAGE HOLDER _____ BALANCE ON MORTGAGE _____

EMPLOYER _____

EMPLOYER _____

EMPLOYER'S ADDRESS _____

EMPLOYER'S ADDRESS _____

LENGTH OF EMPLOYMENT _____ EMPLOYER'S TELEPHONE NO. _____

LENGTH OF EMPLOYMENT _____ EMPLOYER'S TELEPHONE NO. _____

Years _____ Months _____ ()

Years _____ Months _____ ()

OCCUPATION/POSITION _____

OCCUPATION/POSITION _____

ANNUAL GROSS SALARY \$ _____ EMPLOYEE I.D. NO. (If any) _____

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OTHER INCOME: DO NOT REVEAL Income from alimony, child support or separate maintenance payments unless you are relying on such income to repay this account. TOTAL GROSS MONTHLY INCOME _____

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DESCRIBE SOURCE OF OTHER INCOME _____ \$ _____

DESCRIBE SOURCE OF OTHER INCOME _____ \$ _____

PREVIOUS EMPLOYER (If less than 3 years at present employer) _____

PREVIOUS EMPLOYER (If less than 3 years at present employer) _____

PREVIOUS EMPLOYER'S ADDRESS _____

PREVIOUS EMPLOYER'S ADDRESS _____

LENGTH OF EMPLOYMENT _____ EMPLOYER'S TELEPHONE NO. _____

LENGTH OF EMPLOYMENT _____ EMPLOYER'S TELEPHONE NO. _____

Years _____ Months _____ ()

Years _____ Months _____ ()

CHECKING SAVINGS ACCOUNT WITH: _____ ACCOUNT NUMBER(S) _____

CHECKING SAVINGS ACCOUNT WITH: _____ ACCOUNT NUMBER(S) _____

ADDRESS _____

ADDRESS _____

CHECKING SAVINGS ACCOUNT WITH: _____ ACCOUNT NUMBER(S) _____

CHECKING SAVINGS ACCOUNT WITH: _____ ACCOUNT NUMBER(S) _____

ADDRESS _____

ADDRESS _____

