

LAKESIDE STATE BANK

PO Box 190, Oologah, Oklahoma 74053
PO Box 9, Chelsea, Oklahoma 74016
www.lakesidebankok.com

PLEASE DO NOT USE THIS FORM FOR REAL ESTATE SECURED REQUESTS

CONSUMER LOAN APPLICATION

USA PATRIOT ACT NOTICE

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. When you open an account, we will ask for your name, street address, date of birth, and other information that will allow us to identify you. We will also ask to see your driver's license or other identifying documents. Business customers are asked to furnish documents related to the organization.

	Date	Amount Requested	Term (Length of Loan)
		\$	

Purpose of Loan – describe how the proceeds will be used.

<input type="checkbox"/> Purchase Boat / Rec Vehicle	<input type="checkbox"/> Purchase Automobile	<input type="checkbox"/> Refinance Automobile	<input type="checkbox"/> Purchase Motorcycle	<input type="checkbox"/> Purchase Household Goods
<input type="checkbox"/> Home Improvement	<input type="checkbox"/> Vacation	<input type="checkbox"/> Medical Needs	<input type="checkbox"/> Other (Specify): _____	

Type of Collateral – describe the type of collateral offered and how owned

☐ Car, Boat, RV or Motorcycle Year _____ Make & Model _____

Insurance Agent (Name & Address) _____ Has or will the state of Oklahoma issue the title? ☐ Yes ☐ No

☐ Savings or Certificate of Deposit ☐ Unsecured ☐ Other (describe): _____

INFORMATION REGARDING APPLICANT(S) – do not complete Joint Applicant information if you are applying for individual credit in your own name and are relying on your own income and assets and not the income or assets of another person as the basis for repayment of the credit requested.

Applicant's Name (include Jr. or Sr. if applicable)			Joint Applicant's Name (include Jr. or Sr. if applicable)		
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Social Security Number	Home Phone	Birth Date	Social Security Number	Home Phone	Birth Date
	Cell Phone			Cell Phone	

Marital Status (do not complete if you are applying for individual, unsecured credit)

☐ Married ☐ Separated ☐ Unmarried (including single, divorced, widowed)

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Present Address (street, city, state, ZIP) ☐ Rent ☐ Own _____ No. Yrs

Present Address (street, city, state, ZIP) ☐ Rent ☐ Own _____ No. Yrs

email address:

email address:

*If residing at present address for **less than two years**, complete the following*

Former Address (street, city, state, ZIP) ☐ Rent ☐ Own _____ No. Yrs

Former Address (street, city, state, ZIP) ☐ Rent ☐ Own _____ No. Yrs

Name & Address of Employer ☐ Self Employed

Yrs on this job

Yrs employed in this profession

Name & Address of Employer ☐ Self Employed

Yrs on this job

Yrs employed in this profession

Position/Title/Type of Business

Business Phone

Position/Title/Type of Business

Business Phone

Former Employment ☐ Self Employed

Yrs on this job

Business Phone

Former Employment ☐ Self Employed

Yrs on this job

Business Phone

Name & Address of Nearest Relative Not Living in Household

Phone

Relationship

Name & Address of Nearest Relative Not Living in Household

Phone

Relationship

Are both you and the joint applicant a U.S. Citizen?

☐ Yes ☐ No

Have you applied for a loan at Lakeside State Bank before?

☐ Yes ☐ No

Are there any unsatisfied judgments against you?

☐ Yes ☐ No

Are you a co-maker, endorser, or guarantor on any loan?

☐ Yes ☐ No

Are you a Lakeside State Bank customer?

☐ Yes ☐ No

Are you obligated to pay child support or alimony?

☐ Yes ☐ No

Mother's maiden name? (for security purposes) _____

Have you been declared bankrupt within the past 7 years? ☐ Yes ☐ No

If yes, where? Year: _____

Are both you and the joint applicant a U.S. Citizen?

☐ Yes ☐ No

Have you applied for a loan at Lakeside State Bank before?

☐ Yes ☐ No

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Are you a Lakeside State Bank customer?

☐ Yes ☐ No

Are you obligated to pay child support or alimony?

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Mother's maiden name? (for security purposes) _____

Have you been declared bankrupt within the past 7 years? ☐ Yes ☐ No

If yes, where? Year: _____

Gross Monthly Income	Applicant	Joint Applicant	Total	Notice – Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.	
Salary and Wages				Describe Other Income:	
Other (see notice and list in “describe other income”)					\$
Total	\$	\$	\$		\$
Description of Assets:				Pledged?	Value
Cash (Name & Address of Financial Institution):					\$
Automobiles (Make, Model, Year):					
Real Estate (Location, Date Acquired):					
Other (list):					
Total Assets:					\$
Outstanding Debts: (list all indebtedness to individuals or other creditors, including alimony, child support, rent, etc.)			Balance	Past Due?	Monthly Payment
<input type="checkbox"/> Rent <input type="checkbox"/> Mortgage					
Total Debts					
(Attach separate sheet of paper if necessary)				Net Worth	

Certification and Authorization: I/We certify that the information provided in this application is true and correct. My/our signature below authorized Lakeside State Bank to obtain a consumer report and to contact references to obtain loan balances or pay-off information and to check my credit and employment history.

Fair and Accurate Credit Transactions Act of 2003 Notice: We may report information about your loan to credit bureaus. Late payments, missed payments or other defaults on your loan may be reflected in your credit report.

FEDERAL NOTICE FOR SALE OF INSURANCE

Credit Disclosure – UNDER FEDERAL LAW, A LENDER MAY NOT CONDITION AN EXTENSION OF CREDIT ON EITHER:

1. A REQUIREMENT TO PURCHASE AN INSURANCE PRODUCT FROM THE LENDER OR ANY OF ITS AFFILIATES, OR
2. AN AGREEMENT NOT TO OBTAIN, OR PROHIBITION FROM OBTAINING, AN INSURANCE PRODUCT FROM AN UNAFFILIATED ENTITY.

Insurance Disclosure – INSURANCE PRODUCTS ARE:

1. NOT A DEPOSIT OR OTHER OBLIGATION OF THE LENDER OR ANY OF ITS AFFILIATES.
2. NOT GUARANTEED BY THE LENDER OR ANY OF ITS AFFILIATES.
3. NOT INSURED BY THE FEDERAL DEPOSIT INSURANCE CORPORATION (FDIC) OF ANY OTHER AGENCY OF THE UNITED STATES, THE LENDER OR ANY OF ITS AFFILIATES.



Applicant's Request for Quote:

☐ Credit Life ☐ Accident & Health

Joint Applicant's Request for Insurance Quote:

☐ Credit Life ☐ Accident & Health

I/We hereby acknowledge receipt of the above disclosures.

Applicant's Signature	Date	Joint Applicants Signature My signature below reflects the intent to apply for joint credit and to be obligated for repayment of the loan requested if granted.	Date
			

Should I purchase G.A.P.?

You may need Guaranteed Auto Protection (G.A.P.) coverage with your car loan if you do not have a down payment of at least 20%, you are financing your car for more than four years, or you are rolling the debt from your last car into your current automobile loan. Would you like a Lakeside State Bank loan officer to tell you more?

☐ Yes, I/we would like more information about GAP coverage plans available through Lakeside State Bank.