LOAN APPLICATION - FORM #1

BORROWER	CO-BORROWER
Name	**Name**
Home Phone ( )	**Home Phone** ( )
Business Phone ( )	**Business Phone** ( )
(Subject Property of Loan) Street	**(Subject Property of Loan)** Street
City State Zip Code	**City** State Zip Code
Home Address	**Home Address**
Occupation or Profession if Self Employed	**Occupation or Profession if Self Employed**
Current Employer	**Current Employer**
Employment Address	**Employment Address**
Yrs.On Job _____ **Age** _____ **S.S.No.** _____	**Yrs.On Job** _____ **Age** _____ **S.S.No.** _____
Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Separated	**Marital Status:** ☐ Single ☐ Married ☐ Divorced ☐ Separated
I(we) live in the property being pledged for the subject loan: ☐ Yes ☐ No	**I(we) live in the property being pledged for the subject loan:** ☐ Yes ☐ No
Have you filed for bankruptcy in the past 12 months? ☐ Yes ☐ No	**Have you filed for bankruptcy in the past 12 months?** ☐ Yes ☐ No
If yes, what type of bankruptcy was filed? Chapter ☐ 7 ☐ 11 ☐ 13	**If yes, what type of bankruptcy was filed? Chapter** ☐ 7 ☐ 11 ☐ 13
Approximate date of filing _____ **County where filed** _____	**Approximate date of filing** _____ **County where filed** _____

SOURCES OF INCOME Monthly Amt. (List and identify each source separately)	**SOURCES OF INCOME** Monthly Amt. (List and identify each source separately)
_____ _____	_____ _____
_____ _____	_____ _____
_____ _____	_____ _____
Total Income Per month $_____	**Total Income Per month** $_____

MONTHLY EXPENSES/ALLBORROWERS

	Monthly Pmt.		Monthly Pmt.
This loan		Spousal and/or Child Support	
Rent		Unsecured Loan Payments	
Charge Account Payments		Life Insurance Payments	
Credit Card Payments		Car Payments	
Mortgage Payments (including taxes and insurance)		Other	
		Total of all Monthly Expenses	$

AUTHORIZATION TO OBTAIN CREDIT REPORT

In connection with the loan for which I am applying through AMERICAN MUTUAL MORTGAGE, (hereinafter "AMM"), I do hereby authorize AMM to obtain a credit report from any credit reporting agency of its choice. Copies of the report may be given to the beneficiary at the discretion of AMM, and additional copies of said report may be obtained by COMPANY at any time during the term of the subject loan, if approved.

Borrower/Applicant Signature	**Date**	**Borrower/Applicant Signature**	**Date**