



www.citizensstatebank.us

To Creditor:												
I. APPLICANT(S). C SEPARATE CREI		plicant section a	nd sign applica	tion, Compl	ete Co-Ap _l			ion				
■ JOINT CREDIT■ JOINT CREDIT	WITH SPOUSE: C WITH SOMEON!	Complete Applica	ant section and	d Co-Application	ant section no is not yo	and both s	ign application. Each joint applica	nt must complete a Wisconsin reside				
2. DIRECT LOAN	☐ Amount Req											
	To be secured b Owner(s) of col			If yes, des	cribe collat	eral						
APPLICANT												
First Name	M.I	. Last Name			(For se	cured cred	lit or Wisconsin Re	esidents Only) 🗖	Married	☐ Legally Sep	arated	☐ Unmarried
Social Security Numb	per				[Date of Bir	th					
Driver's License Num	nber		Stat	e	E	expiration	Date					
No. of Dependents C	OtherThan Self & S	Spouse			P	Ages			Home Telepl	hone Number		
Street Address				City			State	Zip Code	How	Long?	□ Own	☐ Rent
Previous Address				City			State	Zip Code	How	Long?		
Employer Name		Employer Add	dress				Business Phone		Position		Hov	v Long?
Gross Income			D\\/ools	☐ Month	☐ Year		,	Except Alimony, ch	ild support and n	naintenance)		
Previous Employer N	lame	Employer Add		- Monun	■ leal		\$ Business Phone		Position		Hov	v Long?
Gross Income				D.M. II			,	Other Income (Except Alimony, child support and maintenance)				
\$ Name of nearest rela	tive not living with	ı you	□ Week	☐ Month	☐ Year		\$					
Street Address							City		State		Zip Code	
CO-APPLICAN First Name	M,I	NFORMAT Last Name	ION					esidents Only) 🚨	Married	□ Legally Sep	arated	☐ Unmarried
First Name Social Security Numb	M.I		ION Stat	e	. [cured crec Date of Bir Expiration	th	esidents Only) 🗖	Married	□ Legally Sep	arated	□ Unmarried
First Name Social Security Numb Driver's License Num	M.I per nber	Last Name		e	E	Date of Bir	th	esidents Only) 🗖		□ Legally Sep	arated	□ Unmarried
First Name Social Security Numb Driver's License Num No. of Dependents C	M.I per nber	Last Name		e City	E	Date of Bir Expiration	th	esidents Only) 🗖		hone Number	arated • Own	□ Unmarried □ Rent
First Name Social Security Numb Driver's License Num No. of Dependents C Street Address	M.I per nber	Last Name			E	Date of Bir Expiration	th Date		Home Telepi	hone Number Long?		
First Name Social Security Numb Driver's License Num No. of Dependents C Street Address Previous Address	M.I per nber	Last Name	Stat	City	E	Date of Bir Expiration	th Date State	Zip Code	Home Telepl How	hone Number Long?	□ Own	
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Page I of 2 (Short Form Application)

LIST ALL DEBTS OF PERSONS IDENTIFIED AS APPLICANT AND CO-APPLICANT/SPOUSE Mortgage Holder or Landlord Purchase Price Balance Owed Monthly Mortgage Payment \$ \$ \$ Balance Owed Purchase Price Monthly Payment Vehicle; Year, Make/Model, Financed by/Address \$ \$ \$ \$ \$ ■ Alimony ☐ Child Support ■ Maintenance Payments Other Credit Limit Monthly Payment Charge Card Card Number Issuer Applicant Spouse Balance Dept. Store Account Number Address Applicant Spouse Credit Limit Balance Monthly Payment \$ \$ Other Creditor Account Number Branch/Location Credit Limit Balance Monthly Payment Applicant Spouse \$ \$ Total Monthly Payments ► NOTICE TO MARRIED APPLICANTS: No provision of any marital property agreement, unilateral statement under s.766.59, Wis,, Stats., or court decree under s.766.70, Wis. Stats., adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision. NOTICE OF RIGHT TO RECEIVE COPY OF APPRAISAL: Under the Federal Equal Credit Opportunity Act, if the credit being applied for will be secured by a 1-4 family dwelling, you have the right to a copy of the appraisal report used in connection with your application. If a copy was not already provided to you and you wish a copy, please write to the creditor at the address on the face page of this application. Be sure to include your name and address. The creditor must hear from you no later than ninety (90) days after it notifies you about action taken on your application our you withdraw your application. \square In order to receive a copy of the appraisal report, you must also have paid for \square the appraisal \square the costs of photocopying the report. NOTICE: We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on you account may be reflected in your credit report. For the purpose of obtaining the credit described above, and any future credit granted to the undersigned by the creditor named above, the undersigned, jointly and severally, (1) represent that the above statements are true and complete, (2) authorize the creditor named above, or its agents, to verify them and obtain additional information concerning our credit, employment history or any other information, including credit reports (although creditor may rely on these statements without any further verification), to furnish such information and any other credit experience with me to other, and to answer any questions about our credit experience and other financial relationships with the creditor, and (3) agree to the provisions of any rules, regulations or agreements of the creditor governing such credit. This application is creditor's property. The creditor may share information bearing on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living with its affiliates unless I direct the Creditor at the address above that such information if unrelated to my transactions or experiences with the Creditor may not be shared by the Creditor with its affiliates. The undersigned understand that it may be a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, under the provisions of Title 18, United States Code, Section 1014. IMPORTANT INFORMATION ABOUT PROCEDURES FOR OBTAINING CREDIT 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 obtains credit. What this means for you: When you obtain credit, we ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. Applicant Sign Here _ Date Co-Applicant Spouse Sign Here_ Date (Joint Credit Only) For married Wisconsin resident: The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand the creditor may be required by law to give notice of this credit transaction to my spouse. Applicant Date Page 2 of 2 (Short Form Application) Your partner in banking *Clayton:* 101 Prentice St. South ■ P.O. Box 129 ■ Clayton, WI 54004 ■ 715.948.2142 ■ Fax: 715.948.2151 *La Crosse*: 620 Main St. ■ P.O. Box 219 ■ La Crosse, WI 54602 ■ 608.785.2265 ■ Fax: 608.785.2275

Application received for Creditor by _

WORKSHEET & CHECKLIST FOR CREDITOR USE ONLY