



COMMERCIAL LOAN APPLICATION

BIG HORN FEDERAL SAVINGS BANK
Greybull, Powell, Thermopolis, Cody, Worland, Lovell

Account Number _____

LOAN REQUEST

PURPOSE OF LOAN	AMOUNT REQUESTED\$	MONTHS NEEDED
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Please decide whether you would like:

A joint account with your spouse An individual account A joint account with someone other than your spouse
(Send us separate applications, attached together)

APPLICANT DOB CO-APPLICANT DOB

FULL NAME	DOB	FULL NAME	DOB
PHYSICAL ADDRESS Own Rent Years		PHYSICAL ADDRESS Own Rent Years	
MAILING ADDRESS		MAILING ADDRESS	
PHONE CELL		PHONE CELL	
EMAIL ADDRESS		EMAIL ADDRESS	
PREVIOUS ADDRESS - (Complete if less than 2 years at present address)		PREVIOUS ADDRESS - (Complete if less than 2 years at present address)	

COMPLETE FOR SECURED LOANS ONLY	DEPENDENTS	COMPLETE FOR SECURED LOANS ONLY	DEPENDENTS
<input type="checkbox"/> Married <input type="checkbox"/> Separated	Do Not Include Co-Applicant	<input type="checkbox"/> Married <input type="checkbox"/> Separated	Do Not Include Applicant or Dependents listed by Applicant
<input type="checkbox"/> Unmarried - (Includes Single, Divorced, or Widowed)		<input type="checkbox"/> Unmarried - (Includes Single, Divorced, or Widowed)	
SOCIAL SECURITY NO. / /	NO. AGES	SOCIAL SECURITY NO. / /	NO. AGES

NAME AND ADDRESS OF EMPLOYER - How Long	NAME AND ADDRESS OF EMPLOYER - How Long
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Type of Business Position/Title	Type of Business Position/Title
PREVIOUS EMPLOYER - How Long (Complete if current job held less than two years)	PREVIOUS EMPLOYER - How Long (Complete if current job held less than two years)

Type of Business Position/Title	Type of Business Position/Title
Are there any unsatisfied judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are there any unsatisfied judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No
In the last 7 years have you been declared bankrupt? <input type="checkbox"/> Yes <input type="checkbox"/> No	In the last 7 years have you been declared bankrupt? <input type="checkbox"/> Yes <input type="checkbox"/> No
Did you ever have credit in any other name? <input type="checkbox"/> Yes <input type="checkbox"/> No	Did you ever have credit in any other name? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, What name?	If yes, What name?
Are you responsible for child support? <input type="checkbox"/> Yes <input type="checkbox"/> No Amount	Are you responsible for child support? <input type="checkbox"/> Yes <input type="checkbox"/> No Amount

IF SELF EMPLOYED, PLEASE SUBMIT A BALANCE SHEET, PROFIT AND LOSS STATEMENT, AND COPY OF LATEST FEDERAL TAX RETURN

ASSETS INCOME

DEPOSITS IN CHECKING AND SAVINGS ACCOUNTS	AMOUNT OR VALUE	VERIFICATION REQUESTED <input type="checkbox"/>
Name of Institution Type Account No.	Applicant Co-Applicant	Monthly Income Applicant Co-Applicant
		Base Earning <input type="checkbox"/> Gross <input type="checkbox"/> Net
		Overtime
Vehicles - List Make Year Fully Paid		Bonuses - Commissions
1) <input type="checkbox"/> YES <input type="checkbox"/> NO		Dividends - Interest
2) <input type="checkbox"/> YES <input type="checkbox"/> NO		Other - Optional - see Remarks
3) <input type="checkbox"/> YES <input type="checkbox"/> NO		
Personal Property -Furniture, Art, Jewelry, Etc.		
Stock - Bonds - Name Number @ Value Each Pledge		TOTAL INCOME
		INCOME REMARKS - Note: Income from Alimony, Child Support, or Maintenance
		Payments need not be disclosed unless their consideration is desired.
Real Estate Owned		
TOTAL ASSETS		

LIABILITIES - OBLIGATIONS - CREDIT REFERENCES

NOTE: LIST ALL PERSONAL, TRUST, PARTNERSHIP, OR CORPORATE DEBTS. IF RECENTLY PAID OFF, LIST FOR CREDIT REFERENCE. INCLUDE DEBTS FOR 1ST AND 2ND LIEN PAYMENTS (MORTGAGE OR TRUST DEED), AUTOS, APPLIANCES, FURNITURE, PERSONAL LOANS, AND NOTES, CO-SIGNED NOTES, ALIMONY SUPPORT PAYMENTS, CHARGE ACCOUNTS, AND RENT.

PURPOSE	(A) = Applicant, (CA) = Co-Applicant, (JT) = Jointly	OFFICE USE VERIFICATION REQUESTED	ACCOUNT NUMBER	MONTHLY PAYMENT	BALANCE OWED / PAY OUT OF LOAN	X
	OWED TO (NAME AND ADDRESS)					
RENT				\$		
MTG PAYMENT				\$	If balance	
VEHICLE				\$	is zero,	
VEHICLE				\$	indicate	
CREDIT CARD				\$	date	
CHILD SUPPORT				\$	closed in	
				\$	this space	
				\$		
TOTAL LIABILITIES				\$	\$	

1) ATTACH ADDITIONAL LIST IF MORE SPACE IS NEEDED
2) IF ANY OBLIGATION IS PAST DUE ATTACH LETTER OF EXPLANATION

REAL ESTATE OWNED

ADDRESS OF RESIDENCE PROPERTY		MORTGAGE HOLDER	ADDRESS OF MORTGAGE HOLDER	ACCOUNT NUMBER
PRESENT VALUE	DATE PURCHASED	PURCHASE PRICE	BALANCE FINANCED	MONTHLY PAYMENT
PRESENT BALANCE				

INSURANCE

Agent:	AUTO INSURANCE - COMPANY'S NAME AND ADDRESS	LIFE INSURANCE - COMPANY AND ADDRESS		
Address:				
Phone:	(A) = Applicant; (CA) = Co-Applicant; (JT) = Jointly			
	TYPE	FACE AMOUNT	CASH VALUE	
Carrier:				
Policy #:				

PERSONAL REFERENCES

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU OR PERSONAL REFERENCE	RELATIONSHIP	ADDRESS	CITY	STATE	PHONE

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower," as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when:

- the income or assets of a person other than the Borrower (including the Borrower's spouse) will be used as a basis for loan qualification or
- the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

_____ Borrower

_____ Co-Borrower

Protect Your Loan With: Credit Life & Disabilities Insurance

Big Horn Federal offers a Loan Protection Plan that insures the payments and the amount of your loan. Your Big Horn Federal representative can help you choose the option that best serves your needs. Enrollment is not required as a condition for obtaining the loan. Select from the types of coverages below:

Single Credit Life Insurance? Yes No
 Single Credit Disability Insurance? Yes No
Joint Credit Life Insurance? Yes No

If you checked yes, the Association will disclose the cost of this voluntary insurance to you. A separate insurance election which discloses the terms and conditions of the credit insurance must be signed in order for the coverage to become effective.

Read this statement before you sign this application
 All of the information I've given on this application is true and correct. I understand that you'll confirm the information and retain the application whether or not my application is approved.

You are also authorized to obtain information on my credit, employment and financial condition. You can answer questions and requests from others like stores or credit reporting agencies for credit and experience information about me and my account with you.

I agree to be bound by the Credit Agreement and Disclosures covering this/these Accounts. If this application is for a Joint Account this statement applies to both of us.

Your Signature	Date
Co-Applicant's Signature	Date

BANK USE - TO BE COMPLETED BY BIG HORN FEDERAL

DESCRIPTION OF COLLATERAL

New } Year _____ Make _____
 Used } Model _____
 Serial Number _____
 Mileage _____
 NADA Book Value / Purchase Price \$ _____

New } Year _____ Make _____
 Used } Model _____
 Serial Number _____
 Mileage _____
 NADA Book Value / Purchase Price \$ _____

Loan Requested \$ _____ % to Value _____

BUDGET ANALYSIS

1 Total Monthly Income	_____
Total Housing Expense	_____
Payments on All Debts	_____
Payments for this Loan.....	_____
2 Total All Payments.....	_____
Debt to Income Ratio (Line 2 Divided by Line 1).....	_____ %
Comments:	_____

LOAN DISPOSITION

OFAC CHECK	YES/NO
Loan <input type="checkbox"/> Approved <input type="checkbox"/> Rejected	Amount\$
Automatic Payments <input type="checkbox"/> Coupons <input type="checkbox"/>	
Interest Rate:	%
Term: _____ Months - Payment \$ _____	1st Due:
Approved by _____	Date _____