

TYPE OF CREDIT REQUESTED					
IMPORTANT:CHECK (✓) the appropriate boxes below and complete the applicable sections					
	INDIVIDUAL CREDIT – relying solely on my income or assets		SECURED <small>Describe</small>		
	INDIVIDUAL CREDIT – relying on my income or assets as well as income or assets from other sources		UNSECURED		
	JOINT CREDIT – We intend to apply for joint credit (applicants' initials:)				
TERMS OF LOAN REQUESTED					
Amount: \$	No. of Months	Payment Date Desired	Proceeds to be used for:		
SECTION A - APPLICANT INFORMATION					
<small>If salaried, we'll need a pay stub or W-2. If self-employed, please provide your last two years' income tax returns.</small>					
Name (Last, First, Middle)					
Birth Date / /	Telephone No.	Driver's License No.	Social Security No.	No. Dependents	Ages of Dependents
Address (Street, City, State & Zip)				County	How Long
Previous Address (Street, City, State & Zip)				County	How Long
Employer (Company Name & Address)					How Long
Business Phone	Ext.	Position or Title	Salary Per Month Gross:\$	Net:\$	
Previous Employer (Company Name & Address)					How Long
Name & Address of Nearest Relative Not Living With You <small>Area Code</small>			Relationship	Telephone No. (Including)	
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.					
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
Sources of Other Income					Amount Per Month \$
Is any income listed in this Section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain)				Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?	
SECTION B - JOINT APPLICANT OR OTHER PARTY INFORMATION					
<small>Complete only if: for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property state. If salaried, we'll need a pay stub or W-2. If self-employed, please provide your last two years' income tax returns.</small>					
Name (Last, First, Middle)					
Birth Date / /	Telephone No.	Driver's License No.	Social Security No.	No. Dependents	Ages of Dependents
Address (Street, City, State & Zip)				County	How Long
Previous Address (Street, City, State & Zip)				County	How Long
Employer (Company Name & Address)					How Long
Business Phone	Ext.	Position or Title	Salary Per Month Gross:\$	Net:\$	
Previous Employer (Company Name & Address)					How Long
Name & Address of Nearest Relative Not Living With You <small>Area Code</small>			Relationship	Telephone No. (Including)	
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.					
Alimony, child support, separate maintenance received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
Sources of Other Income					Amount Per Month \$
Is any income listed in this Section likely to be reduced before the credit request is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain)				Have you previously received credit from us? <input type="checkbox"/> No <input type="checkbox"/> Yes - When?	

Section C - Marital Status

Applicant Married Separated Unmarried (including single, divorced, and widowed)
 Other Party Married Separated Unmarried (including single, divorced, and widowed)

Section D - Asset & Debt Information

If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Person. Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

DESCRIPTION OF ASSETS OWNED	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT?	VALUE
Checking Account Number(s) (where)			\$
Savings Account Number(s) (where)			
Certificate of Deposit(s) (where)			
Marketable Securities (issuer, type, no. of shares)			
Real Estate (Location, date acquired)			
Life Insurance (Issuer, face value)			
Automobiles (make, model, year)			
Other (list)			
TOTAL ASSETS			\$

OUTSTANDING DEBTS (Include charge accounts, installment loans, credit cards, rent, mortgages, and other obligations. Use separate sheet if necessary.)

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
First Mortgage Holder			\$	\$	\$
Second Mortgage Holder					
Automobiles (describe)					
TOTAL DEBTS			\$	\$	\$

Complete the following information about both the Applicant and Joint Applicant or Other Person (if applicable):

Are you obligated to make Alimony, Support, or Maintenance Payments? No Yes If yes, to _____ Amt. per mo. \$ _____

Are you a co-maker, endorser, or guarantor on any loan or contract? No Yes If yes, for whom? _____ To whom? _____

Are there any unsatisfied judgments against you? No Yes If yes, to whom owed? _____ Amount \$ _____

Have you been declared bankrupt in the last 10 years? No Yes If yes, where? _____ Year? _____

Signatures - I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature
Date

Date

Other Signature (Where Applicable)

TO BE COMPLETED BY LENDER

DATE APPLICATION RECEIVED

LENDER INITIALS

Approved **Denied** **Withdrawn - Reason:** _____ **Action Date:** _____



SCHERTZ BANK & TRUST CASH FLOW STATEMENT

As of:

<input type="checkbox"/> Individual	<input type="checkbox"/> Joint
<i>Check above if relying solely on individual income.</i>	
<i>Check above if relying on joint income.</i>	
Applicant Name:	Co-Applicant Name:
Gross Monthly Income (Sources of Cash)	Amount (Rounded to the nearest \$100.00)
	Applicant:
	Co-Applicant (If applicable):
Salary/Wages/Bonuses/Commission	
Social Security	
Military Pay	
Pension/Retirement Income	
Interest/Dividends	
*Alimony/Child Support	
Rental/ Royalty Income	
Unemployment	
Food Stamps	
Other	
Other	
Total Gross Monthly Income (Sources of Cash)	
Total Joint Gross Monthly Income	
Monthly Expenses (Uses of Cash)	Amount
Mortgage/Rent Payments	
Vehicle Payments	
Credit Card Payments	
Student Loans	
Household Expenses (Food, Utilities, etc.)	
Insurance (Vehicle, Life, etc.)	
Vehicle (Gasoline, Maintenance, etc.)	
**Travel/Entertainment	
**Contributions	
**Savings	
Other Debt Payments	
Other Debt Payments	
Proposed New Debt Payments	
Total Monthly Expenses	
Debt to Income Ratio (Total Monthly Expenses ÷ Total Gross Monthly Income)	

*Alimony, child support or separate maintenance payments need not be disclosed if you do not wish to have it considered and counted toward your total income.

**Not included in calculation of Debt to Income Ratio

Applicant Signature **Date**

Co-Applicant Signature **Date**