

# CREDIT LINE ACCOUNT AND PERSONAL LOAN APPLICATION

ACCOUNT NUMBER - APPLICANT	ACCOUNT NUMBER - CO-APPLICANT	DATE
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<b>Applicant Information</b> PRINT OR TYPE ALL INFORMATION 1. If You live in a community property state, are You: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Includes Single, Divorced and Widowed)  2. Married applicants can apply for individual credit. Indicate if You would like: <input type="checkbox"/> Individual Credit <input type="checkbox"/> Joint Credit with Your Spouse/Co-Applicant  3. Method of Payment: <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Automatic Transfer <input type="checkbox"/> Cash Payment  The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.	<b>Spouse/Co-Applicant Information</b> 4. Complete Spouse/Co-Applicant Information only if: a. This is for joint credit with Your Spouse or other Co-Applicant. b. Your Spouse will use Your Account. c. You are relying on Your Spouse's income as a source of repayment for the credit requested. d. You live in a community property state: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, Wisconsin (and Puerto Rico).  5. Definitions: Whenever used in this application, the words "You" and "Your" refer to the Applicant(s) or Spouse/Co-Applicant and the words "We", "Us", and "Our" refer to the Lender.
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<b>TYPE OF CREDIT APPLIED FOR</b> <input type="checkbox"/> Personal Loan <input type="checkbox"/> VISA Platinum Secured <input type="checkbox"/> Signature Line of Credit <input type="checkbox"/> HELOC/Second Mortgage <input type="checkbox"/> VISA Platinum <input type="checkbox"/> Share/Certificate Secured	<input type="checkbox"/> Vehicle <input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Refinance <input type="checkbox"/> Other _____ Amount Applied For: \$ _____ Credit Limit Applied For: \$ _____ Purpose: _____
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**There are costs associated with the use of any Credit Card issued to You by Us. You may request specific information about these costs by contacting Us by telephone at (614) 707-4000 (callers from outside Our area code may call collect) or by writing to Us at 6165 Emerald Parkway, Dublin, OH 43016.**

**APPLICANT**

FIRST NAME		INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER		BIRTHDATE
CURRENT STREET ADDRESS			APT. NO.	SINCE (MO. YR.)
CITY			STATE	ZIP
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 3 YEARS)				YEARS THERE
DO YOU:	MONTHLY AMOUNT	NO. OF DEPENDENTS	AGES OF DEPENDENTS	
<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	\$ _____	_____	_____	
HOME TELEPHONE	EMAIL ADDRESS			
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU				
PERSONAL REFERENCE - NAME ADDRESS TELEPHONE				

**SPOUSE/CO-APPLICANT**

FIRST NAME		INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER		BIRTHDATE
CURRENT STREET ADDRESS			APT. NO.	SINCE (MO. YR.)
CITY			STATE	ZIP
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 3 YEARS)				YEARS THERE
DO YOU:	MONTHLY AMOUNT	NO. OF DEPENDENTS	AGES OF DEPENDENTS	
<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	\$ _____	_____	_____	
HOME TELEPHONE	EMAIL ADDRESS			
NAME, ADDRESS AND TELEPHONE OF NEAREST RELATIVE NOT LIVING WITH YOU				
PERSONAL REFERENCE - NAME ADDRESS TELEPHONE				

**EMPLOYMENT AND INCOME** If self-employed or retired, attach financial statement or income tax returns.

CURRENT EMPLOYER		EMPLOYMENT DATE	
ADDRESS/CITY/STATE/ZIP			
WORK TELEPHONE	POSITION	MO. GROSS INCOME	
		\$ _____	
FORMER EMPLOYER	POSITION	YEARS THERE	
OTHER INCOME SOURCE*		MONTHLY AMOUNT	
		\$ _____	

CURRENT EMPLOYER		EMPLOYMENT DATE	
ADDRESS/CITY/STATE/ZIP			
WORK TELEPHONE	POSITION	MO. GROSS INCOME	
		\$ _____	
FORMER EMPLOYER	POSITION	YEARS THERE	
OTHER INCOME SOURCE*		MONTHLY AMOUNT	
		\$ _____	

\* You need not list income from alimony, child support, or separate maintenance payments unless You want it considered in evaluating this credit application.

**INFORMATION FOR GOVERNMENT MONITORING PURPOSES**

**NOTICE: Complete only if this is a Home Improvement Loan, or if You are applying to purchase or refinance a dwelling.**  
 The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may discriminate neither on the basis of this information nor on whether you choose to furnish it. If you furnish the information please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below.

Applicant:     You do not wish to furnish this information  
 Ethnicity:     Hispanic or Latino     Not Hispanic or Latino  
 Race:     American Indian or Alaskan Native     Asian  
            Black or African American     White  
            Native Hawaiian or Other Pacific Islander  
 Sex:     Female     Male

Co-Applicant:     You do not wish to furnish this information  
 Ethnicity:     Hispanic or Latino     Not Hispanic or Latino  
 Race:     American Indian or Alaskan Native     Asian  
            Black or African American     White  
            Native Hawaiian or Other Pacific Islander  
 Sex:     Female     Male

## SIGNATURES

**Real Property Secured Credit:** The undersigned applies for the loan indicated in this application to be secured by a mortgage or deed of trust on the property described herein, and represent that the property will not be used for any illegal or restricted purpose, and that all statements made in this application are true and are made for the purpose of obtaining the loan. Verification may be obtained from any source named in this application. The original or a copy of this application will be retained by the Lender, even if the loan is not granted. You warrant that You:  intend;  do not intend; to occupy the property as Your primary residence. You authorize Us to accept Your facsimile signatures on this application and agree that Your facsimile signature will have the same legal force and effect as Your original signature. You assume any risk that may be associated with permitting Us to accept Your facsimile signature. You fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1014.

PROPERTY ADDRESS: \_\_\_\_\_

**All Other Credit:** You warrant the truth of the above information and You realize that it will be relied upon by Us in deciding whether or not to grant the credit applied for. You hereby authorize Us, Our employees and agents to investigate and verify any information provided to Us by You. If this application is for any Feature Category contained in Our Credit Line Account Program, You agree and understand that if approved, You are contractually liable according to the applicable terms of the Credit Line Account Agreement and Disclosure. You will receive a copy of that Agreement no later than the time of Your first credit advance and You promise to pay all amounts charged to Your Account according to its terms. If this is a joint application, You agree that such liability is joint and several. You authorize Us to accept Your facsimile signatures on this application and agree that Your facsimile signature will have the same legal force and effect as Your original signature. You assume any risk that may be associated with permitting Us to accept Your facsimile signature. **If You are issued a credit card, by signing below, You grant and consent to a lien on Your shares with Us (except IRA and Keogh accounts) and any dividends due or to become due to You from Us to the extent You owe on any unpaid credit card balance.**

You hereby acknowledge Your intent to apply for joint credit \_\_\_\_\_  
Applicant's Initials      Co-Applicant's Initials

X	_____	X	_____
SIGNATURE OF APPLICANT	DATE	SIGNATURE OF SPOUSE/CO-APPLICANT	DATE

**VISA Platinum Secured Applicants:** If Your credit is approved, You grant Us a specific pledge of shares in Your Share Account indicated below and for the amount specified below:

Account Number \_\_\_\_\_ Amount \$ \_\_\_\_\_