MUTUAL SAVINGS BANK
A friend you can bank on.

Consumer Loan Application

Amount Requested	Proceeds Of This Loan Will Be Used For:

INFORMATION ABOUT YOU (Please Print)

Name(please print in the same format as your signature.)	Date Of Birth	Social Security No.	Driver's License No.

Present Street Address	City	State	Zip	Telephone No.

Age of Dependents Marital Date (data need only be given if spouse Will be contractually liable on this loan Married Unmarried Separated Spouse's Name	Spouses Social Security No.	Spouse's Date of Birth

YOUR HOME

Own Mobile Home Rent Other	Name and Address of Mortgage Holder or Landlord

Titled in Name of	Acct#.	Purchase Date	Present Value	Original Cost	Mortgage Balance	Monthly Payment/Rent	How Long Yrs. Mos.

Previous Home Address	City	State	Length- Yrs- Mos

TWO NEAREST RELATIVES NOT LIVING WITH YOU

Name	Address	Telephone No.	Relationship
Name	Address	Telephone No.	Relationship

YOUR INCOME

Present Employer	Position or Title	Monthly Net Income $	Monthly Gross Income $

Business Address	Business Telephone No.	How Long Yrs. And Mos.
Previous Employer	Business Address	How Long Yrs and Mos.

SPOUSE'S EMPLOYMENT (Required only if spouse will be contractually liable on this loan.)

Present Employer	Position or Title	Monthly Net Income $	Monthly Gross Income $

Business Address	Business Telephone No.	How Long Yrs. And Mos.
Other Income (alimony, child support, or maintenance income needs not be revealed if applicant does not choose to disclose it.) Source	$	

YOUR BANKING AND CREDITS

Where is your checking account? What is your balance?	
Do you Pay Alimony?	If Yes what is the amount $

I certify that Information in this application is true and complete. You are authorized to investigate my credit and to verify the Information in this application.

_____ _____

Signature Date Signature Date

Credit Insurance

If you are applying for a loan please be advised that our credit decision cannot be conditioned on whether Insurance is purchased from (or not purchased from) Mutual Savings Bank.
I have also been informed that I(we) may elect to purchase insurance through a company not affiliated with Mutual Savings Bank.
The insurance product is not a deposit .
The insurance product is not guaranteed by Mutual Savings Bank or any of our affiliates.
The Insurance product is not insured by the FDIC or any other government agency.
The insurance product may go down in value.
1 (borrower) understand and agree that any insurance premiums paid to insurance companies as part of this transaction will involve money retained by Lender or paid back to Lender as commissions or other remuneration.

By signing below I(we) acknowledge receipt of this disclosure. I have received them at the time I applied for credit (orally and In writing) and before my initial purchase of Insurance was complete. I(We) have also received a copy of the Mutual Savings Bank Privacy Policy. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

_____ _____

Signature Date Signature Date