

**CONSUMER LOAN APPLICATION**  
**Welcome and thank you for choosing us for your financing needs.**

**Please completely fill out and return to one of our offices or mail directly to:**

**LAKE FOREST BANK**  
 & TRUST COMPANY, N.A.  
 AWINTRUST COMMUNITY BANK

ATTN: Consumer Loan Dept.  
 727 North Bank Ln.  
 Lake Forest, IL 60045  
 847-234-2882

**IMPORTANT: Read these directions before completing this Application.**

Please check the box that applies (one box must be checked):

- I'm applying for a loan in my name only and will rely on my own income/assets to repay.
- We intend to apply together for this loan. Applicant Signature \_\_\_\_\_ Co-Applicant Signature \_\_\_\_\_
- I'm applying for this loan in my name only but will rely on the income or assets of another person to repay.

Type of credit you are looking for (one box must be checked):

- Everyday Loan
- CD Secured

Loan Purpose \_\_\_\_\_ Requested Loan Amount \$ \_\_\_\_\_ Number of Months \_\_\_\_\_

**IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT**

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

APPLICANT				CO -APPLICANT							
First Name		M.I.	Last Name		First Name		M.I.	Last Name			
Home Address			City	State/Zip	Home Address			City	State/Zip		
<input type="checkbox"/> Own <input type="checkbox"/> Rent		How long there?		<input type="checkbox"/> Own <input type="checkbox"/> Rent		How long there?					
Name of Present Landlord/Mortgage Holder:				Name of Present Landlord/Mortgage Holder:							
Prior Address (only if present address is less than 2 yrs.)				Prior Address (only if present address is less than 2 yrs.)							
Primary Phone #		Secondary Phone #		Email Address		Primary Phone #		Secondary Phone #		Email Address	
Social Security #			Date of Birth			Social Security #			Date of Birth		
<b>DO NOT COMPLETE IF THIS IS AN APPLICATION FOR INDIVIDUAL UNSECURED CREDIT.</b>						<b>DO NOT COMPLETE IF THIS IS AN APPLICATION FOR INDIVIDUAL UNSECURED CREDIT.</b>					
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)						<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)					
Are you a party to a civil union entered in IL or similar relationship in another state? <input type="checkbox"/> Yes <input type="checkbox"/> No						Are you a party to a civil union entered in IL or similar relationship in another state? <input type="checkbox"/> Yes <input type="checkbox"/> No					
U.S. Citizen:			Permanent Resident:			U.S. Citizen:			Permanent Resident:		
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Drivers License No.		State	Date Issued	Expiration	Drivers License No.		State	Date Issued	Expiration		
Other ID (State, Military, Tribal, etc.)		State/Agency	Date Issued	Expiration	Other ID (State, Military, Tribal, etc.)		State/Agency	Date Issued	Expiration		
Employer:			How Long There:			Employer:			How Long There:		
Address:			Phone:			Address:			Phone:		
Type of Business:		Occupation/Title:			Type of Business:		Occupation/Title:				

GROSS MONTHLY INCOME				MONTHLY HOUSING EXPENSE	
	Applicant	Co-Applicant	Total	Rent (Monthly)	\$
Base Income	\$	\$	\$	First Mortgage (PITI**)	
Overtime				Condo Assn Dues	
Bonuses				Total Monthly Payment	\$
Other (*)				Payments to alimony, child support, or separate maintenance?	\$
Total	\$	\$	\$		

(\*) Income from alimony, child support or separate maintenance need not be revealed if you do not wish to have it considered.  
 (\*\*) PITI=Principal, interest, taxes and insurance.

Applicant and Co-applicant must answer the following questions:	Applicant	Co-Applicant	Explanation and amount if any:
1. Are there any outstanding judgments against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Have you ever declared bankruptcy in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Are you a guarantor, co-maker or endorser on another note?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Agreement:** I/We certify that everything stated in this application and on any attachments, is true and correct. You may keep the original or copy of this application whether or not the loan is granted. By signing below, I/We authorize you to verify information from any source named in the application and to answer questions others may ask you about my credit record with you. I/We 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 1B, United States Code, and Section 1014. 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.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR INTERNAL USE ONLY**

Date application received	NMLS #	How application was received
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