



Consumer Credit Application

White Sulphur Springs Office
 PO Box 709
 205 West Main
 White Sulphur Springs, MT 59645
 Phone 406.547.3331
 Fax 406.547.3335
 Toll Free 800.362.6669

Shields Valley Office
 PO Box 2
 205 1st Street
 Clyde Park, MT 59018
 Phone 406.686.4204
 Fax 406.686.4206

Paradise Valley Office
 PO Box 298
 307 Story Road
 Emigrant, MT 59027
 Phone 406.333.9009
 Fax 406.333.9328

Livingston Office
 1203 W. Park Street
 Livingston, MT 59047
 Phone 406.222.9010
 Fax 406.222.4456
 Toll Free 877.625.4375

Helena Office
 PO Box 5509
 2000 Prospect Avenue
 Helena, MT 59604
 Phone 406.495.1900
 Fax 406.495.1905
 Toll Free 877.726.9797

Lewistown Office
 PO Box 660
 401 W. Main Street
 Lewistown, MT 59457
 Phone 406.538.7448
 Fax 406.538.7440

Bozeman Office
 1276 N. 15th Avenue
 Suite 102
 Bozeman, MT 59715
 Phone 406.577.3731
 Fax 406.204.5150

IMPORTANT APPLICATION INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and asked to provide one or more forms of identification to fulfill this requirement. In some instances, we may use outside sources to confirm the information. Our privacy policy and federal law protect the information you provide.

Type of Credit Requested					
<p>IMPORTANT: Check (v) the appropriate box below and complete the applicable sections.</p> <p><input type="checkbox"/> Individual Credit - You are relying <u>solely</u> on your income or assets. Complete all but co-applicant section.</p> <p><input type="checkbox"/> Individual Credit - You are relying on your income or assets as well as income or assets from other sources. Complete all sections.</p> <p><input type="checkbox"/> Joint Credit - By initialing below, you intend to apply for "joint credit." Complete all sections.</p> <p>Applicant _____ Co-Applicant _____</p>					
<p>I/We hereby apply for:</p> <p><input type="checkbox"/> Personal (Unsecured) Loan <input type="checkbox"/> Vehicle Refinance Loan <input type="checkbox"/> Debt Consolidation</p> <p><input type="checkbox"/> Vehicle Purchase Loan* <input type="checkbox"/> Overdraft Protection <input type="checkbox"/> Home Equity Line of Credit (HELOC)</p> <p>*Purchase Price \$ _____ <input type="checkbox"/> Other: _____</p>					
Date	Amount Requested	For How Long	Collateral Offered (HELOC Applicants - Complete the Collateral Property Section)		
	\$				
Purpose					
Collateral Property - HELOC Applicants Only					
Collateral Property Address		Year Built	Date Purchased	Present Value	Balance Owing
				\$	\$
Insurance Carrier Name & Address					
Mortgage Holder Name & Address			Phone No.	Acct No.	
Credit Insurance Disclosure					
<p>You have submitted an application for a loan. In connection with your application, Lender may be soliciting, offering to sell, or will sell you an insurance product or annuity. Federal law requires Lender to provide you with the following disclosures.</p> <p><u>Credit Disclosures</u></p> <p>1. Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from the Lender or any of its affiliates.</p> <p>2. Lender, as a condition of granting you a loan, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.</p> <p><u>Acknowledgment</u></p> <p>By signing this application on page 3, I acknowledge that I have read, received, and understand this insurance disclosure. Unless I have applied for credit by mail, I also acknowledge that Lender has provided this disclosure to me orally.</p> <p>I/We Desire Credit Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes <input type="checkbox"/> Single Life <input type="checkbox"/> Joint Life <input type="checkbox"/> Disability Lender's Initials for Oral Disclosure _____</p>					
Applicant Information					
Full Name		Birthdate	Social Security No.	No. of Dependents	
Other Names in Which Credit Has Been Granted			Phone No.	Cell Phone	
Email Address		Preferred Method of Contact		Best Time to Contact You	
		<input type="checkbox"/> Phone <input type="checkbox"/> Cell Phone <input type="checkbox"/> Email		<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon	
Physical Address		City	State	Zip	No. of Years
Mailing Address - If Different		City	State	Zip	
Previous Address		City	State	Zip	No. of Years
Present Employer & Address					No. of Years

Applicant Information					
Business Phone	Position/Occupation	Monthly Salary \$	Date(s) Paid		
Previous Employer & Address			Phone No.	No. of Years	
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, or separate maintenance income received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
Sources of Other Income				Amount per Month \$	
Bank Name & Address		Checking Account No.		Current Balance \$	
Bank Name & Address		Savings Account No.		Current Balance \$	
Are there or has there ever been any judgments, bankruptcies, garnishments or other legal proceedings against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe.					
Name & Address of Nearest Relative Not Living With You			Relationship	Phone No.	
Co-Applicant Information					
Full Name		Birthdate	Social Security No.		No. of Dependents
Other Names in Which Credit Has Been Granted			Phone No.	Cell Phone	
Email Address		Preferred Method of Contact <input type="checkbox"/> Phone <input type="checkbox"/> Cell Phone <input type="checkbox"/> Email		Best Time to Contact You <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon	
Physical Address		City	State	Zip	No. of Years
Mailing Address - If Different		City	State	Zip	
Previous Address		City	State	Zip	No. of Years
Present Employer & Address					No. of Years
Business Phone	Position/Occupation	Monthly Salary \$		Date(s) Paid	
Previous Employer & Address			Phone	No. of Years	
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, or separate maintenance income received under: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
Sources of Other Income				Amount per Month \$	
Bank Name & Address		Checking Account No.		Current Balance \$	
Bank Name & Address		Savings Account No.		Current Balance \$	
Are there or has there ever been any judgments, bankruptcies, garnishments, or other legal proceedings against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe.					
Name & Address of Nearest Relative Not Living With You			Relationship	Phone	
Marital Status					
Complete only for joint or secured credit, or if applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested.					
Applicant	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced & widowed)		
Co-Applicant	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced & widowed)		

Personal Statement

IMPORTANT: Please complete the Personal Statement for the applicant, and co-applicant if applicable.

Use the following symbols when completing columns "Owned By" and "Owed By"

A = Applicant Only C = Co-Applicant Only J = Jointly by Applicant and Co-Applicant Q = Applicant and Another Party

Table with columns: I/We Own, Owned By (A, C, J, Q), Value, I/We Owe, Owed By (A, C, J, Q), Monthly Payment, Present Balance. Rows include Cash on Hand and in Bank, Stocks and Bonds, Auto, Home, and Total Assets/ Liabilities.

Authorization/Acknowledgments

I hereby declare that the above credit representations are true, accurate, and complete to the best of my knowledge and belief and are submitted for the purposes of receiving credit.

The following acknowledgments are for HELOC Applicants only. Appraisal Notice Acknowledgment: If this loan will be secured by the first lien on a 1-4 family residential property, Bank of the Rockies may order an appraisal to determine the property's value and charge you for this appraisal.

I acknowledge receipt of the Home Equity Brochure and the lender's Home Equity disclosure statement on today's date.

X _____ Date X _____ Date
Applicant Co-Applicant

Table split into Budget - To Be Completed by Applicant and Bank Use Only. Budget section includes Monthly Net Income, Total Monthly Income, and various expenses like Utilities, Food Allowance, Auto Expense, etc. Bank Use Only section includes Loan Officer Comments.

Thank you for considering Bank of the Rockies.