

NOTE:COLORADO RESIDENCE ONLY

SCAN THEN EMAIL APPLICATION TO: KCROSSWHITE@ AFBA.COM

OR

FAX APPLICATION: (719) 475-7827, ATTN. KCROSSWHITE

Closed End, Secured/Unsecured Credit

CREDIT APPLICATION

IMPORTANT: Please read these directions before completing this Application, and check (✓) the appropriate box below.

- Application instructions including boxes for individual credit, joint credit, and income from alimony/child support.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR 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.

AMOUNT REQUESTED, PAYMENT DATE DESIRED, PROCEEDS OF CREDIT TO BE USED FOR

SECTION A - INFORMATION REGARDING APPLICANT

FULL NAME (Last, First Middle), BIRTH DATE, HOME PHONE, BUSINESS PHONE

IF U.S. PERSON: DRIVERS LICENSE NO., STATE, DATE OF ISSUANCE, DATE OF EXPIRATION, SOCIAL SECURITY NO. or TAX I.D. NO.

IF NON U.S. PERSON: DRIVERS LICENSE NO., STATE, DATE OF ISSUANCE, DATE OF EXPIRATION, SOCIAL SECURITY NO. or TAX I.D. NO.

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS

PREVIOUS ADDRESS (Street, City, State, & Zip), HOW LONG AT PREVIOUS ADDRESS?, EMAIL ADDRESS

PRESENT EMPLOYER (Company Name & Address), OCCUPATION, POSITION OR TITLE, HOW LONG WITH PRESENT EMPLOYER?, NAME OF SUPERVISOR

PREVIOUS EMPLOYER (Company Name & Address), HOW LONG WITH PREVIOUS EMPLOYER?

YOUR PRESENT GROSS SALARY OR COMMISSION, YOUR PRESENT NET SALARY OR COMMISSION, NO. DEPENDENTS, AGES OF DEPENDENTS

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.

OTHER INCOME, SOURCES OF OTHER INCOME, Have you ever received credit from us?

Is any income listed in this Section likely to be reduced before the credit requested is paid off?

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU, RELATIONSHIP, TELEPHONE NO.

SECTION B - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheets if necessary.)

FULL NAME (Last, First, Middle), RELATIONSHIP TO APPLICANT (If Any), BIRTH DATE, HOME PHONE, BUSINESS PHONE

IF U.S. PERSON: DRIVERS LICENSE NO., STATE, DATE OF ISSUANCE, DATE OF EXPIRATION, SOCIAL SECURITY NO. or TAX I.D. NO.

IF NON U.S. PERSON: DRIVERS LICENSE NO., STATE, DATE OF ISSUANCE, DATE OF EXPIRATION, SOCIAL SECURITY NO. or TAX I.D. NO.

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS

PRESENT EMPLOYER (Company Name & Address), OCCUPATION, POSITION OR TITLE, HOW LONG WITH PRESENT EMPLOYER?, NAME OF SUPERVISOR

PREVIOUS EMPLOYER (Company Name & Address), HOW LONG WITH PREVIOUS EMPLOYER?

YOUR PRESENT GROSS SALARY OR COMMISSION, YOUR PRESENT NET SALARY OR COMMISSION, NO. DEPENDENTS, AGES OF DEPENDENTS

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.

OTHER INCOME, SOURCES OF OTHER INCOME, Has Joint Applicant or Other Party ever received credit from us?

Is any income listed in this Section likely to be reduced before the credit requested is paid off?

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU, RELATIONSHIP, TELEPHONE NO.

SECTION C - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)

APPLICANT: Married, Separated, Unmarried (Including single, divorced, or widowed)