

Please print the completed form and mail or fax.

Oklahoma

15 E. 15th, Edmond, OK 73013 fax 405-341-9125

Colorado

102 N. Cascade, Suite 100, Colorado Springs, CO 80903 fax 719-866-6331





Amount requested \$ \_\_\_\_\_

#### **FLEX EQUITY HOME EQUITY LOAN**

Indicate w	hether you w		plicants can apply for With sp					
APPLIC	ANT:							
NAME	LAST		FIRST		MIDDLE			
ADDRESS	STREET							
CITY		STATE	ZIP	NO. OF YEARS	RENT OWN			
FORMER ADDRESS	STREET							
CITY		STATE	ZIP	NO. OF YEARS	RENT OWN			
MARITAL STATUS MARRIED SEPARATED UNMARRIED SINGLE DIVORCED OR WIDOWED								
DEPENDEN* OTHER THAN LISTE CO-APPLICANTS		R	AGES					
EMPLOYER	NAME							
ADDRESS	STREET	-						
CITY		STATE	ZIP					
YEARS EMPLOYED IN THIS PROFESSION		YEARS ON THIS JOB	TYPE OF BUSINESS	POSITION/TITLE				
DATE OF BIRTH SOCIAL SECURITY			BUSINESS PHONE	HOME PHONE				
				I				
Pleas	se attach a c	opy of your present mortg	age or deed with a legal D	escription of property to b	oe used as collateral.			
TITLE HELD	) IN WHAT NAI	ME(S)						
YEAR ACQ	UIRED	ORIGINAL COST	EST. OF CURRENT VALUE	PRESENT MORTGAGE BALA	ANCE			

#### **CO-APPLICANT:**

NAME	LAST		FIRST	MIDDLE				
ADDRESS	STREET							
CITY	CITY STATE		ZIP NO. OF YEARS		RENT OWN			
FORMER ADDRESS	STREET							
CITY	STATE		ZIP	NO. OF YEARS	RENT OWN			
MARITAL STATUS	MARRIE	ED SEPARATED	UNMARRIED SINGLE, DIVORCED OR WIDOWED					
DEPENDENTS NUMBER OTHER THAN LISTED CO-APPLICANTS			AGES					
EMPLOYER	R NAME							
ADDRESS	STREET	7						
CITY STATE		ZIP						
YEARS EMPLOYED IN THIS PROFESSION			YEARS ON THIS JOB	TYPE OF BUSINESS	POSITION/TITLE			
DATE OF BIRTH SOCIAL SECURITY			BUSINESS PHONE	HOME PHONE				

## **GROSS MONTHLY INCOME:**

ITEM	BORROWER	CO-BORROWER	TOTAL
BASE EMPLOYMENT INCOME	\$	\$	\$
OVERTIME			
BONUSES			
COMMISSIONS			
DIVIDEND/INTEREST			
NET RENTAL INCOME			
OTHER (BEFORE COMPLETING, SEE NOTICE			
UNDER DESCRIBE OTHER INCOME BELOW)			
TOTAL	\$	\$	\$

MO	NTHLY HOUS	NG EXPEN	SE:						
RENT	-	PRESENT							
FIRST	T MORTGAGE (P&I)	\$							
OTHE	ER FINANCING (P&I)								
HAZA	RD INSURANCE								
REAL	. ESTATE TAXES								
MOR	TGAGE INSURANCE								
HOME	EOWNER ASSOC. DUES								
OTHE	ER								
TOTA	L MONTHLY PAYMENT	\$							
UTILI	TIES	\$							
TOTA	L	\$							
DES	A(APPLICANT) C		NOTICE: ALIMONY, CHILI			IANCE INCOME NEED NOT BE REVEALE: E IT CONSIDERED AS A BASIS FOR REPA		MONTHLY	AMOUNT
			APPLICANT OR CO-APPL	LICANT DOES NO	T CHOOSE TO HAV	ETI CONSIDERED AS A BASIS FOR REPA	YING THE LOAN	-	
A/C									
A/C									
A/C									
	T PREVIOUS (	CREDIT RE	FERENCES	:					
A/C	A(APPLICANT) C(CO-APPLICANT)	CREDITOI & ADDRES		PURPOS	SE	ACCOUNT NUMBER	HIGHEST	BALANCE	DATE PAID
A/C									
A/C									
A/C									
API	PLICANT:				CO-AP	PLICANT:			
	DO YOU HAVE ANY GUARANTOR OR			NO	DO YOU HAVE ANY GUARANTOR OR CO-SIGNER LIABILITY?			□ NO	
	ARE THERE ANY SUITS OR JUDGEMENTS AGAINST YOU?  YES NO			NO	ARE THERE ANY SUITS OR JUDGEMENTS AGAINST YOU?  YES			YES	□ NO
HAVE YOU DECLARED BANKRUPTCY IN THE LAST 10 YEARS?  YES NO			NO		J DECLARED BANKRUP <sup>*</sup> ST 10 YEARS?	ГСҮ	YES	□ NO	

# STATEMENT OF ASSETS AND LIABILITIES (If additional Assets or Liabilities use a separate sheet)

ASSETS		LIABILITIES AND PLEDGES						
DESCRIPTION	AMOUNT	CREDITOR'S NAME, ADDRESS & ACCOUNT NUMBER	ACCT. NAME (IF NOT APPLICANTS)	MONTHLY PAYMENT MONTHS LEFT TO PAY	UNPAID BALANCE			
CHECKING & SAVINGS ACCOUNTS (SHOW NAMES OF INSTITUTIONS AND ACCOUNT NUMBERS)								
STOCKS AND BONDS								
LIFE INSURANCE NET CASH VALUE FACE AMOUNT \$		OTHER DEBTS INCLUDING STOCK PLEDGES						
SUBTOTAL LIQUID ASSETS		REAL ESTATE LOANS						
REAL ESTATE OWNED (ENTER MARKET VALUE FROM SCHEDULE OF REAL ESTATE OWNED)								
VESTED INTEREST IN RETIREMENT FUND								
NET WORTH OF BUSINESS OWNED (ATTACH FINANCIAL STATEMENT)								
AUTOMOBILES (MAKE AND YEAR)		AUTOMOBILE LOANS						
FURNITURE AND PERSONAL PROPERTY		ALIMONY, CHILD SUPPORT & SEPARATE MAINTENANCE PAYMENTS OWED TO						
OTHER ASSETS (ATTACH ITEMIZED ASSETS)		TOTAL MONTHLY PAYMENTS						
TOTAL ASSETS	A	NETWORTH (A MINUS B)		TOTAL LIABILITIES	В			

## SCHEDULE OF REAL ESTATE OWNED (If additional properties owned use a separate sheet)

ADDRESS OR PROPERTY (INDICATE "S" IF SOLD, "PS" IF SALE OR "R" IF RENTAL PROPERTY IS BEING HELD FOR	TYPE OF PROPERTY	PRESENT MARKET VALUE	AMOUNT OF MTGS. & LEINS	GROSS RENTAL INCOME	MORTGAGE PAYMENTS	TAXES, INS., MAINTENANCE & MISC.	NET RENTAL INCOME	
		TOTALS						

NOT GRANTED. I/WE AUTHORIZED THE BANK TO MAKE A	NY NECESSARY CREDIT INVESTIGATION AND ANSWER QUESTIONS ABOUT THE BANK'S CREDIT
EXPERIENCE WITH ME/US. I/WE FULLY UNDERSTAND TH.	AT IT IS A FEDERAL CRIME PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, TO KNOWINGLY
MAKE ANY FALSE STATEMENTS CONCERNING ANY OF TH	HE ABOVE FACT AS APPLICABLE UNDER THE PROVISIONS OF TITLE 18, UNITED STATES CODE,
SECTION 1014.	
DATE:	SIGNATURE OF APPLICANT:
5,11 <u>1</u> .	

**SIGNATURE OF CO-APPLICANT:** 

DATE:

AGREEMENT: THE UNDERSIGNED APPLIES FOR THE LOAN INDICATED IN THE APPLICATION TO BE SECURED BY A MORTGAGE OR DEED OF TRUST ON THE PROPERTY DESCRIBED HEREIN, AND REPRESENTS 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 LENDOR, EVEN IF THE LOAN IS