

**CONSUMER LOAN APPLICATION**

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT**

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

TO: Name/Address of Lender	What type of credit are you requesting? <i>(Please check appropriate box.)</i> <input type="checkbox"/> SECURED <input type="checkbox"/> UNSECURED <input type="checkbox"/> OPEN-END LINE OF CREDIT <input type="checkbox"/> CLOSED-END TERM LOAN <input type="checkbox"/> INDIVIDUAL (Own income or assets) <input type="checkbox"/> INDIVIDUAL (Own income or assets plus income or assets from other sources) <input type="checkbox"/> JOINT <i>(please initial)</i> _____ <input type="checkbox"/> COSIGNER
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Loan Amount	Interest Rate	Term	Payment	Purpose
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**APPLICANT/COSIGNER INFORMATION**

Name (Last)	(First)	(MI)	(Suffix)	Taxpayer ID Number (SSN/TIN)	Date of Birth
Street Address			Driver's License/ID Number	State	Home Phone Number
City	State	ZIP Code	County	How Long There	No. of Dependents Rent/Mortgage Pmnt. \$

Previous Address *(if less than 2 years at current address)*

Employer	Address		Phone Number
Position	How Long	<input type="checkbox"/> Gross <input type="checkbox"/> Net <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly \$	Average Monthly Overtime Pay \$
Previous Employer	Address		Position How Long

Nearest Relative Not Living With You	Relationship
Address	City    State    ZIP Code    Relative's Phone Number

Immigration Status     U.S. Citizen     Perm. Resident of U.S.     Other:

Marital Status: Do not complete if this application is for individual unsecured credit unless responding party resides in a community property state or is relying on property located in such a state for repayment of the credit requested.

Married     Separated     Unmarried (including single, divorced, and widowed)

Other Income: Amount \$    Frequency    Source

Alimony, Child Support, Separate Maintenance Payments: You are not required to disclose income from alimony, child support, or separate maintenance payments. However, if you are relying on income from alimony, child support, or separate maintenance payments as a basis for repayment of this obligation, please complete the information below.

Payment Received Pursuant to:     Court Order     Written Agreement     Oral Understanding

Alimony per Month \$    Child Support per Month \$    Separate Maintenance Payment per Month \$

**CO-APPLICANT INFORMATION**

Name (Last)	(First)	(MI)	(Suffix)	Taxpayer ID Number (SSN/TIN)	Date of Birth
Street Address			Driver's License/ID Number	State	Home Phone Number
City	State	ZIP Code	County	How Long There	No. of Dependents Age of Dependents

Previous Address *(if less than 2 years at current address)*

Employer	Address		Phone Number
Position	How Long	<input type="checkbox"/> Gross <input type="checkbox"/> Net <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly \$	Average Monthly Overtime Pay \$
Previous Employer	Address		Position How Long

Nearest Relative Not Living With You	Relationship
Address	City    State    ZIP Code    Relative's Phone Number

Immigration Status     U.S. Citizen     Perm. Resident of U.S.     Other:

Marital Status:     Married     Separated     Unmarried (including single, divorced, and widowed)

Other Income: Amount \$    Frequency    Source

Alimony, Child Support, Separate Maintenance Payments: You are not required to disclose income from alimony, child support, or separate maintenance payments. However, if you are relying on income from alimony, child support, or separate maintenance payments as a basis for repayment of this obligation, please complete the information below.

Payment Received Pursuant to:     Court Order     Written Agreement     Oral Understanding

Alimony per Month \$    Child Support per Month \$    Separate Maintenance Payment per Month \$

**ADDITIONAL INFORMATION**

**Other Income:**    Applicant    • Amount \$    • Source  
    Co-Applicant    • Amount \$    • Source

If you, a joint applicant, or other party answers "yes" to any of the following questions, please explain in the space provided.

Are you a guarantor or co-maker of any leases, contracts, or debts?    Applicant:     Yes     No    Joint Applicant/Other Party:     Yes     No

Are there any suits or judgments pending against you?    Applicant:     Yes     No    Joint Applicant/Other Party:     Yes     No

Have you been declared bankrupt in the last 10 years?    Applicant:     Yes     No    Joint Applicant/Other Party:     Yes     No



# BORROWER'S BLANKET AUTHORIZATION

**PRIVACY ACT NOTICE:** This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor or borrower under its program. It will not be disclosed outside the agency except as required by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38 USC, Chapter 37 (if VA); by 12 USC, Section 1701 et seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et seq., or 7 USC, 1921 et seq. (if USDA/FMHA).

<p><b>Borrower Information</b></p> <p>Name 1: Social Security Number 1: Name 2: Social Security Number 2: Street Address 1: Street Address 2: City/ST/ZIP:</p>	<p><b>Lender Information</b></p> <p>Name 1: Street Address 1: Street Address 2: City/ST/ZIP:</p>
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DATE	LOAN NUMBER			

**BORROWER AUTHORIZATION:** I hereby authorize the Lender to verify my past and present employment earnings records, bank accounts, stock holdings, and any other balances that are needed to process my loan application. I further authorize the Lender to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. It is understood that a copy of this form will also serve as authorization.

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Date

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Date



**Capitol  
Federal**

*True Blue® for over 115 years*

## **CUSTOMER APPLICATION CHECKLIST CONSUMER LOANS**

**Please complete and return the items indicated below.**

### **Vehicle and Personal Unsecured Loans:**

\_\_\_\_\_ Complete the "Credit Application" in its entirety and return to us. Remember to sign and date the form. Complete the names, addresses and loan numbers of other creditors. Include also any rent payment and the name of the landlord.

\_\_\_\_\_ Complete, sign and date, and return the "Borrower Blanket Authorization" form.

\_\_\_\_\_ Copies of two consecutive, recent pay stubs for each applicant. The previous year's W-2's also will be required if the paystubs cover a period of time less than six months or if there has been a change of employment within the last two years.

\_\_\_\_\_ Self-employed persons and applicants otherwise relying on a significant amount of business income (such as commissioned salespersons) must furnish complete copies of the previous two year's tax returns.

### **In addition, for Vehicle Loans Only:**

\_\_\_\_\_ The name, address and loan number of the existing lienholder. If that lienholder will be paid off with the proceeds of this loan.

\_\_\_\_\_ A copy of the purchase contract, if the vehicle is a new purchase, or a copy of the existing title if the vehicle is pre-owned. Capitol Federal may require an inspection of pre-owned vehicles.

\_\_\_\_\_ The name, address and telephone number of your insurance agent.

### **For Certificate of Deposit Loans:**

\_\_\_\_\_ Complete the "Credit Application" for the following sections. Remember to sign and date the form.  
Applicant(s) Name;  
Current address, city, state and zip code;  
Applicant(s) birthdate,  
Applicant(s) social security number;  
Applicant(s) home and business telephone numbers;  
Applicant(s) employer;  
Loan purpose;  
References; and  
Declarations section.

\_\_\_\_\_ Complete, sign and date, and return the "Borrowers Blanket Authorization" form.

Picture identification is REQUIRED for ALL parties before the loan closing can be completed. This documentation cannot be expired. Remember to bring this documentation not later than at loan closing.

Thank you for requesting loan information from Capitol Federal. We look forward to the opportunity to assist with your financing needs. If you have any questions, please contact us.