

HOME EQUITY 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 account are you applying for? <i>(Please check appropriate box):</i> <input type="checkbox"/> INDIVIDUAL (Own income or assets) <input type="checkbox"/> COSIGNER <input type="checkbox"/> INDIVIDUAL (Own income or assets plus income or assets from other sources) <input type="checkbox"/> JOINT <i>(please initial)</i> _____ Are you interested in Credit Life/Disability Insurance that is offered by Lender if this loan is approved? <i>(Please check appropriate box)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO
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LOAN TERMS

Loan Amount	Interest Rate	Loan Type	<input type="checkbox"/> HELOC <input type="checkbox"/> Closed End <input type="checkbox"/> Fixed Rate <input type="checkbox"/> Variable Rate (type): _____ <input type="checkbox"/> Other _____
Term	Payment	Purpose	

COLLATERAL INFORMATION

Property Address	Year Built	Purchase Date	Present Value
Title Holder	Title Holder Address		
Insurance Carrier	Insurance Carrier Address		
Current Mortgage Holder	Current Mortgage Holder Address		Current Mortgage Holder Phone
Monthly Mortgage Payment	<input type="checkbox"/> Taxes & Insurance Included <input type="checkbox"/> not included	Home Purchase Price	Balance Owing
		Mortgage Loan Account Number	
Additional Collateral Description			
Do you intend to occupy residence as your primary residence? ___ Yes ___ No			

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
Age of Dependents					
Previous Address <i>(if less than 2 years at current address)</i>					
Employer	Employer Address			Employer 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	Previous Employer Address			Position	How Long
Nearest Relative Not Living with You			Relationship		
Relative's Address		City	State	ZIP Code	Relative's Phone Number
Immigration Status <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Perm. Resident of U.S. <input type="checkbox"/> Other:					
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, and widowed)					
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: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> 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 <i>(if less than 2 years at current address)</i>					
Employer	Employer Address			Employer 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	Previous Employer Address			Position	How Long
Nearest Relative Not Living with You			Relationship		
Relative's Address		City	State	ZIP Code	Relative's Phone Number
Immigration Status <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Perm. Resident of U.S. <input type="checkbox"/> Other:					
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, and widowed)					
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: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding					
Alimony per Month \$		Child Support per Month \$		Separate Maintenance Payment per Month \$	

ADDITIONAL INFORMATION

Other Income: Applicant	• Amount \$	• Source
Other Income: 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: <input type="checkbox"/> Yes <input type="checkbox"/> No	Joint Applicant/Other Party: <input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any suits or judgments pending against you?	Applicant: <input type="checkbox"/> Yes <input type="checkbox"/> No	Joint Applicant/Other Party: <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been declared bankrupt in the last 10 years?	Applicant: <input type="checkbox"/> Yes <input type="checkbox"/> No	Joint Applicant/Other Party: <input type="checkbox"/> Yes <input type="checkbox"/> No

BORROWER'S CERTIFICATION & AUTHORIZATION

Certification

The undersigned certify the following:

1. I/We have applied for a mortgage loan from **Capitol Federal Savings Bank** ("Lender"). In applying for the loan, I/we completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/we omit any pertinent information.
2. I/We understand and agree that Lender reserves the right to change the mortgage loan review process to a full documentation program. This may include verifying the information provided on the application with the employer and/or the Financial Institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

Authorization to Release Information

To Whom It May Concern:

1. I/We have applied for a mortgage loan from Lender. As part of the application process, Lender and the mortgage guaranty insurer (if any) may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
2. I/We authorize you to provide to Lender and to any investor to whom Lender may sell my mortgage, and to the mortgage guaranty insurer (if any), any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.
3. Lender or any investor that purchases the mortgage or the mortgage guaranty insurer (if any) may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to Lender, the investor that purchased the mortgage, or the mortgage guaranty insurer (if any) is appreciated.
6. Mortgage guaranty insurer (if any):

Borrower

DATE

Borrower

DATE



CUSTOMER APPLICATION CHECKLIST

Please complete and return the items indicated below. You may also apply online through Capitol Federal's web site at www.capfed.com.

CLOSED END/FIXED RATE SECOND MORTGAGE LOANS

- _____ Complete the "Home Equity Loan Application" in its entirety and return it to us. Remember to sign and date the application. Complete the names, addresses, and loan numbers of other creditors, including creditors to be paid off with the proceeds of this loan.
- _____ Copies of at least 30 days of recent pay stubs and the prior year W2 for each applicant.
- _____ 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 personal and business tax returns and a year to date profit and loss statement (for applications received on or after April 1st).
- _____ A copy of your first mortgage document (deed of trust if in Missouri) and promissory note, if that loan is not with Capitol Federal.
- _____ If the property securing this loan is under the ownership of a trust, please notify the Loan Originator. A Certification of Trust will be required, in lieu of providing a copy of the Trust agreement.
- _____ Complete, sign, date and return the "Borrower Blanket Authorization" form.
- _____ Sign, date and return the "Appraisal Disclosure." [NOTE: This disclosure is required only if a new appraisal is being obtained for this loan or if an existing appraisal previously obtained by Capitol Federal is being used. Use of the county valuation does not require this disclosure.]
- _____ Complete and return the "Information for Government Monitoring Purposes" disclosure. [NOTE: This disclosure is required only if the purpose of your loan will be for home improvements or another dwelling-secured loan will be paid off with a portion of the proceeds of this loan.]
- _____ Review, sign and return the Financial Conditions Certification.

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 home equity 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.

GOVERNMENT MONITORING INFORMATION

Lender's Name and Address:

Capitol Federal Savings
 700 S Kansas Ave
 Topeka KS 66603

Applicant's Complete Name and Address:

Co-Applicant's Complete Name
 (and Address, if different than Applicant's)

THE FOLLOWING INFORMATION IS REQUESTED BY THE FEDERAL GOVERNMENT FOR CERTAIN TYPES OF LOANS RELATED TO A DWELLING IN ORDER TO MONITOR THE LENDER'S COMPLIANCE WITH EQUAL CREDIT OPPORTUNITY, FAIR HOUSING, AND HOME MORTGAGE DISCLOSURE LAWS. YOU ARE NOT REQUIRED TO FURNISH THIS INFORMATION, BUT ARE ENCOURAGED TO DO SO. YOU MAY SELECT ONE OR MORE DESIGNATIONS FOR "RACE." THE LAW PROVIDES THAT A LENDER MAY NOT DISCRIMINATE ON THE BASIS OF THIS INFORMATION, OR ON WHETHER YOU CHOOSE TO FURNISH IT. HOWEVER, IF YOU CHOOSE NOT TO FURNISH THE INFORMATION AND YOU HAVE MADE THIS APPLICATION IN PERSON, UNDER FEDERAL REGULATIONS THE LENDER IS REQUIRED TO NOTE ETHNICITY, RACE, AND SEX ON THE BASIS OF VISUAL OBSERVATION OR SURNAME. IF YOU DO NOT WISH TO FURNISH THIS INFORMATION, PLEASE CHECK BELOW.

Applicant

Co-Applicant

<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
<p>ETHNICITY</p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p>RACE</p> <p><input type="checkbox"/> American Indian or Alaska Native</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Black of African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> Black of African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> White</p> <p>SEX</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p>	<p>ETHNICITY</p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p>RACE</p> <p><input type="checkbox"/> American Indian or Alaska Native</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Black of African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> Black of African American</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</p> <p><input type="checkbox"/> White</p> <p>SEX</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p>
<p>Applicant's Signature _____ Date _____</p>	<p>Co-Applicant's Signature _____ Date _____</p>



FINANCIAL CONDITIONS CERTIFICATION

Loan Number:

Borrower(s):

Property Address:

Congratulations on your decision to apply for a home equity loan with Capitol Federal Savings. Whether you are a new or long time homeowner, we understand that the process of home financing may be stressful. Your mortgage and note will establish a long-term financial obligation that needs to be reasonable for you based upon your financial circumstances, *i.e.*, your ability to repay. As the lender, it is important for us to obtain a clear and accurate understanding of your financial condition and any expected future changes that may impact your ability to repay the loan on this home.

As the borrower(s) I/we understand that the loan application must list all outstanding debts, obligations and/or liabilities for each loan applicant. It is my/our duty to update this information if any change occurs in my/our financial situation, including changes in liabilities (debts) as well as changes or anticipated changes in employment status, like a job layoff, salary change, or modification in pay status from salary to commissions. The lender is required to monitor the borrower(s) credit report information up to and including the day of loan closing. Increases in liability balances and/or additional liabilities incurred can delay the loan closing or jeopardize the loan approval entirely. The lender strongly urges borrower(s) not to:

- Change jobs without inquiring about the impact on the loan approval.
- Apply for or obtain new credit lines (credit cards, signature loans, retail cards, store discounts/credit offers, car purchase).
- Co-sign or guarantee loans for anyone, including student loans.

Should a change in liabilities or obligations be unavoidable, please contact your loan originator before taking any action. If you do apply for additional credit, increase your monthly debts, have a change in employment or anticipate a change in employment, please notify your loan originator immediately. You must disclose all information even if it is not discovered by the lender.

All applicants will be required to sign an affidavit at closing stating that:

1. My/our financial condition has not changed since the loan application was submitted.
2. I/we are not aware of any changes to my/our circumstances that could negatively impact my/our ability to repay this loan, *i.e.*, job layoff, pending loan applications, change in sources of income or method of payment, etc.
3. I/we have provided the lender a true, accurate and complete listing of all my/our liabilities and debt obligations.

Date

Date

NOTICE OF RIGHT TO RECEIVE A COPY OF APPRAISALS

Capitol Federal Savings Bank
700 S Kansas Ave
Topeka, Kansas 66603
(785)235-1341
NMLS Company Identifier: ""
NMLS Originator Identifier:

LOAN NUMBER	NOTICE DATE	

APPLICANT INFORMATION

NOTICE TO APPLICANT

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close.

You can pay for an additional appraisal for your own use at your own cost.

By signing below, you acknowledge that you have received and read a copy of the above Notice.

Date

Date

WAIVER OF DELIVERY TIMING

Under Federal law, we are required to give you a copy of any appraisals promptly upon completion or three days prior to closing, whichever is earlier. You may waive this timing requirement and instead receive a copy at closing or account opening, or if the loan is not completed, within 30 days.

By signing below, you waive your right to receive a copy of any appraisals prior to closing or account opening.

Date

Date