

Instructions

Please complete **all** pages of the loan application below. Once complete, please print, sign, and date. The completed application may be dropped off at any Community Bank & Trust location, e-mailed to the lender of your choice, e-mailed to the entire lending group, or faxed to any CB&T number listed below.

Columbus Junction

Sara Griffin	sgriffin@commbk.net	Fax: 319-728-7733
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Muscatine

Steven Bloomquist	sbloomquist@commbk.net	Fax: 563-263-2219
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Vicki Kaufmann	vkaufmann@commbk.net	Fax: 563-263-2219
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Wapello

Kara Hammer	khammer@commbk.net	Fax: 319-523-8314
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Wilton

Lily Geiger	lgeiger@commbk.net	Fax: 563-732-3172
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Lending Group	autoloans@commbk.net	
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COMMUNITY BANK & TRUST COMPANY CONSUMER APPLICATION

Credit Requested Is: <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Collateral Secured Loan <input type="checkbox"/> Personal Unsecured Loan	Account Requested: <input type="checkbox"/> Individual <input type="checkbox"/> Joint
Amount Requested \$	Description of Collateral Offered
We intend to apply for joint credit Initial	
Purpose of Credit Request	Applicant Co-Applicant

If the Applicant is married, he or she may apply for individual credit. For Marital Status, check one if a) you are applying for a secured credit; b) you reside in a community property state; or c) you are relying on property in a community property state as a basis for repayment of the credit requested.

Applicant	APPLICANT INFORMATION	Co-Applicant			
Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor	Applicant Name (include Jr. or Sr. if applicable)	Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor			
Social Security Number	Home Phone (incl. area code)	DOB (mm-dd-yyyy)	Social Security Number	Home Phone (incl. area code)	DOB (mm-dd-yyyy)
Email Address	Dependents (not listed by Co-Applicant)	Email Address	Dependents (not listed by Applicant)		
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed)	no. ages	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed)	no. ages		
Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien	Present Address (street, city, state, ZIP) since	Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien	Present Address (street, city, state, ZIP) since		
Mailing Address, if different from Present Address		Mailing Address, if different from Present Address			
If residing at present address for less than two years, complete the following:					
Former Address (street, city, state, ZIP) from to		Former Address (street, city, state, ZIP) from to			

Applicant	EMPLOYMENT / INCOME INFORMATION	Co-Applicant	
Name & Address of Employer <input type="checkbox"/> Self Employed	Yrs. on this job <input type="checkbox"/> Full time	Name & Address of Employer <input type="checkbox"/> Self Employed	Yrs. on this job <input type="checkbox"/> Full time
Position/Title & Type of Business	Business Phone (incl. area code)	Position/Title & Type of Business	Business Phone (incl. area code)
Gross Monthly Income \$	Name & Address of Employer <input type="checkbox"/> Self Employed	Gross Monthly Income \$	Name & Address of Employer <input type="checkbox"/> Self Employed
Position/Title & Type of Business	Business Phone (incl. area code)	Position/Title & Type of Business	Business Phone (incl. area code)
Name & Address of Employer <input type="checkbox"/> Self Employed	Dates from to	Name & Address of Employer <input type="checkbox"/> Self Employed	Dates from to
Position/Title & Type of Business	Business Phone (incl. area code)	Position/Title & Type of Business	Business Phone (incl. area code)
Name & Address of Employer <input type="checkbox"/> Self Employed	Dates from to	Name & Address of Employer <input type="checkbox"/> Self Employed	Dates from to
Position/Title & Type of Business	Business Phone (incl. area code)	Position/Title & Type of Business	Business Phone (incl. area code)

NOTICE: 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	\$	Other Income	\$
Other Income	\$	Other Income	\$
Other Income	\$	Other Income	\$

HOUSING INFORMATION			
<input type="checkbox"/> Own <input type="checkbox"/> Rent since	Monthly Housing/Rent \$	Present Value \$	Date Purchased

CASH ASSET INFORMATION		
Financial Institution Name	Saving Account Balance \$	Checking Account Balance \$

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

X _____
Applicant Date

X _____
Co-Applicant Date

ASSETS AND LIABILITIES ADDENDUM TO CONSUMER LOAN APPLICATION	
1. Assets	
a. Real Estate	
1. Property Address	
2. Property Description	
3. Property Value	
4. Property Tax	
5. Property Insurance	
6. Property Liens	
7. Property Encumbrances	
8. Property Title	
9. Property Deed	
10. Property Survey	
11. Property Zoning	
12. Property Easements	
13. Property Restrictions	
14. Property Other	
b. Personal Assets	
1. Vehicle	
2. Boat	
3. Motorcycle	
4. Other Vehicle	
5. Other Personal Property	
6. Other Assets	
7. Other Liabilities	
8. Other Encumbrances	
9. Other Title	
10. Other Deed	
11. Other Survey	
12. Other Zoning	
13. Other Easements	
14. Other Restrictions	
15. Other Other	

Applicant: _____

Application Number:

[illegible]

"*" indicates obligations satisfied at or before loan closing.

INSURANCE DISCLOSURE FOR CREDIT APPLICATION

Applicant:

Lender:

Community Bank & Trust Company
2609 2nd Ave
Muscatine, IA 52761

IMPORTANT

DO NOT SIGN THIS FORM UNTIL YOU CAREFULLY
READ IT AND UNDERSTAND ITS CONTENT

Purpose.

You have submitted an application for a loan. In connection with your loan 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.

Credit Disclosures.

1. Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from Lender or any of its affiliates.
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.

Acknowledgment.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.

APPLICANT:

X

Applicant

Date

INSURANCE DISCLOSURE FOR CREDIT APPLICATION

Applicant:

Lender:

Community Bank & Trust Company
2609 2nd Ave
Muscatine, IA 52761

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BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.

APPLICANT:

X

Applicant

Date