

CONSUMER CREDIT APPLICATION



PO Box 764
Newfield, NJ 08344-9558
856-692-3440 | 1-800-690-3440

Date: _____

We intend to apply for joint credit. _____

Signature of Applicant

Signature of Co-Applicant

☐ Secured Loan {Complete Collateral Section}☐ Unsecured Loan

Amount requested: \$ _____ for _____ months. Purpose of the Loan _____

APPLICANT Complete this section. Also, Complete "Co-Applicant" section if this is a joint application. If you are relying on income from another person for repayment of this loan, see important notice below. If you do not think that you qualify for credit on your own and someone else has agreed to co-sign a loan for you, the co-signer must complete a separate application.

Name (First, MI, Last)	Social Security #	Date of Birth
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Home Phone Number ()	Cell Phone Number ()	Email
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Address (No. & Street) (If less than 3 Years, Previous also)	City	State	Zip	How long have you lived at this address
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Mailing Address (If Different)	☐ Own ☐ Rent	Rent/Mortgage \$	Name of mortgage holder or landlord
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Previous Address	City	State	Zip	How long did you live at this address
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Employer Name (If less than 5 Years, Previous also)	Business Phone ()
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Employer Address	City	State	Zip	Position
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If self-employed, name of Business	Annual Salary*	*Enter only base salary, wages and retirement income.	How Long at employer
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Previous employer name and address	City	State	Zip	How Long at employer
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Important Notice: Other sources of income, alimony, child support, or separate maintenance income need not to be revealed if you do not wish to have it considered as a basis for repaying this obligation. If you wish to rely on such income, you must provide us with the following information on the person(s) who will be making payments to you. Use additional page if needed. If this source of income necessary to make a credit decision, we will have to connect that person to obtain additional information to process this loan application.

Name (First, MI, Last)	Phone Number ()	Other Income \$	Type
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Address	City	State	Zip
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LIST ALL DEBITS Include bank, finance company, credit card, storage charge, personal debts, and pension plan loans, also alimony, support payments and court judgements. Attach additional sheet if necessary. If none state none.

NAME AND ADDRESS OF CREATOR	IN WHAT NAME	ACCT. NUMBER	UNPAID BALANCE	MONTHLY PAYMENT

PLEASE READ AND SIGN I certify that I have read the foregoing statement, all statements, and Information on both sides of this application. The information furnished is complete, true, and correct to the best of my knowledge and belief. I authorize you to make such inquiries regarding the information furnished herein as may be required in connection with this application and I authorize anyone to furnish it and I agree this statement shall remain your property whether or not this credit is granted. I further agree to notify you of any material change in the above statement. In addition, I was informed of and received a copy of the customer information Private Policy, the Notice of Right to Receive Copy of Appraisals, USA Patriot Act Notice and FACT Act Notice.

Signature of Applicant: _____

Where is best to reach you: _____

CO-APPLICANT Complete this section only if you are applying for credit jointly and the loan will be in two names. If Co-applicant is relying on income from another person for repayment of this loan, see important notice below.

Name (First, MI, Last)		Social Security #		Date of Birth	
Home Phone Number ()		Cell Phone Number ()		Email	
Address (No. & Street) (If less than 3 Years, Previous also)		City	State	Zip	How long have you lived at this address
Mailing Address (If Different)		☐ Own ☐ Rent	Rent/Mortgage \$	Name of mortgage holder or landlord	
Previous Address		City	State	Zip	How long did you live at this address
Employer Name (If less than 5 Years, Previous also)		Business Phone ()			
Employer Address		City	State	Zip	Position
If self-employed, name of Business	Annual Salary*	*Enter only base salary, wages and retirement income.			How Long at employer
Previous employer name and address		City	State	Zip	How Long at employer

Important Notice: Other sources of income, alimony, child support, or separate maintenance income need not to be revealed if you do not wish to have it considered as a basis for repaying this obligation. If you wish to rely on such income, you must provide us with the following information on the person(s) who will be making payments to you. Use additional page if needed. If this source of income necessary to make a credit decision, we will have to connect that person to obtain additional information to process this loan application.

Name (First, MI, Last)		Phone Number ()	Other Income \$	Type
Address		City	State	Zip

LIST ALL DEBITS Include bank, finance company, credit card, storage charge, personal debts, and pension plan loans, also alimony, support payments and court judgements. Attach additional sheet if necessary. If none state none.

NAME AND ADDRESS OF CREATOR	IN WHAT NAME	ACCT. NUMBER	UNPAID BALANCE	MONTHLY PAYMENT

PLEASE READ AND SIGN I certify that I have read the foregoing statement, all statements, and Information on both sides of this application. The information furnished is complete, true, and correct to the best of my knowledge and belief. I authorize you to make such inquiries regarding the information furnished herein as may be required in connection with this application and I authorize anyone to furnish it and I agree this statement shall remain your property whether or not this credit is granted. I further agree to notify you of any material change in the above statement. In addition, I was informed of and received a copy of the customer information Private Policy, the Notice of Right to Receive Copy of Appraisals, USA Patriot Act Notice and FACT Act Notice.

Signature of Co-Applicant: _____ Where is best to reach you: _____

COLLATERAL If this loan is to be secured, please provide information on the collateral that will be used to secure the loan.

Newfield National Bank Certificate of Deposit Certificate#		Current Balance:		In Name(s) of		Matures:	
Vehicle () New () Used		Year:	Make:	Model:	VIN No.	Milage:	
Name of Insurance Co.				Current Balance Owed (If any) \$			
Other:							



Right to Receive a Copy of Appraisals

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 or loans secured by a first lien on a dwelling, even if your loan does not close.

You may pay for additional appraisal for your own use at your own cost.

Fair and Accurate Credit Transactions Act Notice

We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

Identification Program as Required by the USA PATRIOT Act

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.

In some cases, identification will be requested for current account holders if original documentation was not obtained with the opening of the account.

We ask for your understanding as we work to support these efforts to maintain the security of your funds and our country.

The following information is required to process your loan request:

1. Completed application
2. Copy of two most recent pay stubs
3. Copy of most recent full tax return (If loan amount is \$25,000 or more, or if borrower is self-employed)
4. Copy of invoice (If auto loan)
5. Copy of Photo ID

Newfield Bank reserves the right to request any additional information that may be needed to process the application.