

Personal Line of Credit Application

Checking Account Number _____ Amount Requested _____

IMPORTANT: Check one of the following boxes. You may apply for separate or joint credit.

- INDIVIDUAL CREDIT:** Complete APPLICANT section and sign below. If you are married and a Wisconsin resident, also complete the information as to your non-applicant spouse.
- JOINT CREDIT WITH SPOUSE:** Complete application and co-applicant sections. Both the applicant and the spouse should sign below.
- JOINT CREDIT WITH _____ who is not your SPOUSE.** Each of you must complete a separate application as if applying for separate credit and submit together, including co-applicant section if married AND a Wisconsin resident.

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

APPLICANT INFORMATION:					SPOUSE INFORMATION:					CO-APPLICANT (JOINT) <input type="checkbox"/> OR NON-APPLICANT <input type="checkbox"/>							
NAME	FIRST	MIDDLE	LAST	JR <input type="checkbox"/> SR <input type="checkbox"/>	NAME	FIRST	MIDDLE	LAST	JR <input type="checkbox"/> SR <input type="checkbox"/>								
SOC. SEC/TIN#		BIRTHDATE		HOME PHONE	SOC. SEC/TIN#		BIRTHDATE		HOME PHONE								
DRIVERS LICENSE #			STATE	EXPIRATION DATE	DRIVERS LICENSE #			STATE	EXPIRATION DATE								
ADDRESS NUMBER AND STREET CITY STATE ZIP					ADDRESS NUMBER AND STREET CITY STATE ZIP												
YEARS MONTHS		RENT <input type="checkbox"/> OWN <input type="checkbox"/>		RENT OR MONTHLY PAYMENT	YEARS MONTHS		RENT <input type="checkbox"/> OWN <input type="checkbox"/>		RENT OR MONTHLY PAYMENT								
PREVIOUS ADDRESS (IF LESS THAN 2 YEARS)				NUMBER AND STREET			PREVIOUS ADDRESS (IF LESS THAN 2 YEARS)				NUMBER AND STREET						
CITY		STATE	ZIP	YEARS MONTHS	CITY		STATE	ZIP	YEARS MONTHS								
BANK					BANK												
CHECKING ACCOUNT #					SAVINGS ACCOUNT #												
EMPLOYED BY:		NAME			EMPLOYED BY:		NAME										
SELF <input type="checkbox"/>					OTHERS <input type="checkbox"/>												
ADDRESS				CITY	STATE	BUSINESS PHONE		ADDRESS				CITY	STATE	BUSINESS PHONE			
YEARS MONTHS		TRADE OR OCCUPATION			GROSS INCOME:			YEARS MONTHS		TRADE OR OCCUPATION			GROSS INCOME:				
NAME OF PREVIOUS EMPLOYER				ADDRESS			NO. YRS.		NAME OF PREVIOUS EMPLOYER				ADDRESS			NO. YRS.	
<small>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. Income from medical insurance, disability or wage continuation insurance need not be revealed if applicant(s) does not choose to have it considered as a basis for repaying this obligation.</small>																	
OTHER TYPE OF INCOME					MONTHLY AMOUNT			OTHER TYPE OF INCOME					MONTHLY AMOUNT				
					\$								\$				
<small>Credit references - include finance companies, banks, credit cards, charge accounts, etc.</small>																	
NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT		NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT					
NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT		NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT					
NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT		NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT					
NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT		NAME OF CREDITOR ADDRESS		ACCOUNT NUMBER		BALANCE	MONTHLY PMT					

Annual Fee	
Personal Interest Bearing Checking	\$25.00
Relationship Checking	\$25.00
Free Checking	\$35.00
GYC Member Discounted Rate	\$10.00

NOTICE TO MARRIED APPLICANTS: No provisions of any marital property agreement, unilateral statement under s.766.59 WI Stats., or court decree under s.766.70 WI Stats., adversely affects the interest of the creditor unless the creditor, prior to the time of credit is granted or an open-end-credit plan is entered into, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision.

For the purpose of obtaining the credit described above, and any future credit granted to the undersigned by the creditor named above, the undersigned, jointly and severally, represent that the statements are true and complete, authorize the creditor named above, or its agents, to verify them and obtain additional information concerning our credit standing and furnish the same to others, to answer any questions about our credit experience and other financial relationships with the creditor and agree to the provisions of any rules regulations or agreements of the creditor governing such credit. This application is creditor's property. The undersigned understand that it may be a federal crime punishable by fine or imprisonment or both to knowingly make any false statements, concerning any of the above facts, under Title 18, US Code, Section 1014.

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. I/We agree that if approved, the "Personal Line of Credit" will not be used to purchase or refinance property securing the credit.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OBTAINING CREDIT: 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 obtains credit. What this means for you: When you obtain credit, 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.

My/Our signature(s) below demonstrate(s) acceptance of the Personal Line of Credit Agreement and Disclosure upon approval.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

FOR MARRIED WISCONSIN RESIDENT: The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand the creditor may be required by law to give notice of this credit transaction to my spouse.

Applicant Signature _____ Date _____

Interest Rate and Interest Charges	
Annual Percentage Rate	14.90%
Paying Interest	Finance charges begin to accrue on the date each advance is made, until paid in full.
Penalty Fees	
Late Payment	\$10.00 You may be charged for each billing cycle in which the bank receives less than the minimum payment due. This fee is charged the 10th day after the payment due date.
Return Check Fee	You may be charged a Return Check Fee for each payment check which is returned unpaid. See Account Services & Transaction Fees Disclosure for more information.
How We Will Calculate Your Balance: National Exchange Bank & Trust uses the daily balance method (including new purchases). See the Agreement and Disclosure for more details.	
Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your Personal Line of Credit Agreement and Disclosure.	

FOR INTERNAL USE

Authorizing Officer _____ Date _____ Amount _____

CSR System Input _____ Date _____ PLC Account Type _____