

CHECK APPROPRIATE BOX

- Individual Credit - applying for credit in your own name and relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested. (Complete Section 2.)
- Joint Credit - we intend to apply for joint credit. (Complete Sections 2 and 3). Please initial _____
- Individual Credit - applying for credit in your own name but relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested. (Complete Sections 2 and 3).

SECTION 1: WHAT KIND OF LOAN DO YOU NEED?

PERSONAL LOAN
 SECURED LOAN
 CHECKLOAN
 AUTO
 OTHER _____

AMOUNT REQUESTED \$ _____ TERM _____ PURPOSE _____

SECTION 2: TELL US ABOUT YOURSELF (APPLICANT)

FIRST, MIDDLE INITIAL, LAST NAME OF APPLICANT						SOCIAL SECURITY NUMBER			
STREET ADDRESS				CITY		COUNTY	STATE	ZIP CODE	
YEARS THERE	HOME PHONE		Mo	BIRTH DATE	Day	Year	NUMBER OF DEPENDENTS	AGES	
DRIVER'S LICENSE NO.			DATE ISSUED		PLACE OF ISSUANCE			DATE EXPIRES	
PREVIOUS ADDRESS				CITY		STATE	ZIP CODE		YEARS
PRESENT EMPLOYER			ADDRESS			BUSINESS PHONE ()		POSITION/TITLE	YEARS
PREVIOUS EMPLOYER (If with present employer less than three years)			ADDRESS			BUSINESS PHONE ()		POSITION/TITLE	YEARS
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						PRESENT GROSS SALARY OR COMMISSION \$ _____ <input type="checkbox"/> WK <input type="checkbox"/> MO <input type="checkbox"/> YR			
OTHER INCOME: \$ _____ <input type="checkbox"/> WK <input type="checkbox"/> MO <input type="checkbox"/> YR		SOURCES OF OTHER INCOME			Have you been Bankrupt in the last 10 years? <input type="checkbox"/> YES <input type="checkbox"/> NO		If Yes provide details on a separate sheet of paper		
					Has a judgement been entered against you or your salary garnished in the last 7 years? <input type="checkbox"/> YES <input type="checkbox"/> NO				

SECTION 3: TELL US ABOUT YOURSELF (CO-APPLICANT)

FIRST, MIDDLE INITIAL, LAST NAME OF APPLICANT						SOCIAL SECURITY NUMBER			
STREET ADDRESS				CITY		COUNTY	STATE	ZIP CODE	
YEARS THERE	HOME PHONE		Mo	BIRTH DATE	Day	Year	NUMBER OF DEPENDENTS	AGES	
DRIVER'S LICENSE NO.			DATE ISSUED		PLACE OF ISSUANCE			DATE EXPIRES	
PREVIOUS ADDRESS				CITY		STATE	ZIP CODE		YEARS
PRESENT EMPLOYER			ADDRESS			BUSINESS PHONE ()		POSITION/TITLE	YEARS
PREVIOUS EMPLOYER (If with present employer less than three years)			ADDRESS			BUSINESS PHONE ()		POSITION/TITLE	YEARS
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						PRESENT GROSS SALARY OR COMMISSION \$ _____ <input type="checkbox"/> WK <input type="checkbox"/> MO <input type="checkbox"/> YR			
OTHER INCOME: \$ _____ <input type="checkbox"/> WK <input type="checkbox"/> MO <input type="checkbox"/> YR		SOURCES OF OTHER INCOME			Have you been Bankrupt in the last 10 years? <input type="checkbox"/> YES <input type="checkbox"/> NO		If Yes provide details on a separate sheet of paper		
					Has a judgement been entered against you or your salary garnished in the last 7 years? <input type="checkbox"/> YES <input type="checkbox"/> NO				

SECTION 4: PROVIDE US WITH SOME FINANCIAL REFERENCES (If you need more space use a separate sheet.)

CHECKING ACCOUNT (Bank Name, Branch, and Address)		<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT	ACCOUNT NUMBER	BALANCE \$ _____
SAVINGS ACCOUNT, CERTIFICATES, IRA OR OTHER (Bank Name, Branch, and Address)		<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT	ACCOUNT NUMBER	BALANCE \$ _____

SECTION 5: PROVIDE US WITH SOME PERSONAL REFERENCES

NAME OF A RELATIVE NOT LIVING WITH YOU		ADDRESS		RELATIONSHIP	TELEPHONE NUMBER ()
NAME OF A PERSONAL REFERENCE NOT LIVING WITH YOU		ADDRESS		RELATIONSHIP	TELEPHONE NUMBER ()

FOR LOAN REQUEST OF MORE THAN \$50,000, THE BANK'S PERSONAL FINANCIAL STATEMENT IS ALSO REQUIRED.



SECTION 6: YOUR FINANCIAL OBLIGATIONS (Include Charge Accounts, Installment Contract, etc. Use separate sheet if necessary.)

NAME OF COMPANY OR BANK	ACCOUNT NUMBER	PRESENT BALANCE	MONTHLY PAYMENT	ACCOUNT IN NAME OF
				<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT
				<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT
				<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT
				<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT
				<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT
				<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT
				<input type="checkbox"/> APPLICANT <input type="checkbox"/> CO-APPLICANT

OTHER DEBTS (Including Obligations, Suits, Judgements, Legal Claims, Child Support, Maintenance Payments, as well as Co-borrower/Guarantor of other financial obligations)

SECTION 7: YOUR ASSETS (IF YOU NEED MORE SPACE USE A SEPARATE SHEET)

DESCRIPTION	VALUE	SUBJECT TO DEBT (YES/NO)	NAME(S) OF OWNER(S)
REAL ESTATE (Address)			
AUTOMOBILES (Make & Year)			
CASH (Bank Name)			
MARKETABLE SECURITIES (Brokerage Name)			
OTHER ASSETS (Describe)			

SECTION 8: PROPERTY INFORMATION

NO. AND STREET		CITY		COUNTY	STATE	ZIP CODE
LOT #	BLOCK #	YEARLY INSURANCE	YEARLY TAXES	DATE PURCHASED	PURCHASE PRICE \$	PRESENT VALUE \$
PROPERTY TYPE (1-4 FAMILY):		<input type="checkbox"/> PRIMARY RESIDENCE	<input type="checkbox"/> SECONDARY RESIDENCE	<input type="checkbox"/> INVESTMENT	CONDOMINIUM: <input type="checkbox"/> YES <input type="checkbox"/> NO	

SECTION 9: MORTGAGE INFORMATION

AMOUNT OF ORIGINAL MORTGAGE \$	MORTGAGE BALANCE \$	MORTGAGE HELD BY:	MONTHLY PAYMENT \$
TAXES INCLUDED IN PAYMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	INSURANCE INCLUDED IN PAYMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	RENTAL INCOME? <input type="checkbox"/> YES <input type="checkbox"/> NO	MONTHLY AMOUNT? \$
ANY OTHER MORTGAGES? <input type="checkbox"/> YES <input type="checkbox"/> NO	MORTGAGE BALANCE \$	MORTGAGE HELD BY:	MONTHLY PAYMENT \$

Please complete the following when applying for an Auto, Truck, or Motorcycle Loan or any other Loan where you will pledge a Title as security:

NEW <input type="checkbox"/> USED <input type="checkbox"/>	YEAR	MAKE	MODEL#	DESCRIPTION	SELLING PRICE EXCLUDING SALES TAX \$ _____
VIN					LESS NET TRADE \$ _____
AUTOMATIC TRANS. <input type="checkbox"/>	MANUAL <input type="checkbox"/>	POWER STEERING <input type="checkbox"/>	ABS BRAKES <input type="checkbox"/>	AIR CONDITIONING <input type="checkbox"/>	CASH DOWN \$ _____ \$ _____
POWER WINDOWS <input type="checkbox"/>	POWER SEATS <input type="checkbox"/>	CONVERTIBLE <input type="checkbox"/>	ROOF RACK <input type="checkbox"/>	SUN ROOF <input type="checkbox"/>	UNPAID BALANCE \$ _____
RADIO (DESCRIBE)	OTHER (DESCRIBE)				TOTAL AMOUNT FINANCE \$ _____
THIS CAR WILL BE REGISTERED IN NAME OF		NUMBER AND STREET	CITY	STATE	OPERATORS LICENSE NO

SIGNATURES: PLEASE READ BEFORE SIGNING

In the following paragraph the words "I, me, and my" refer to all persons signing below and/or "you and your" refer to the Lender. I declare that information in this application is true and complete. No suits, judgements, bankruptcy proceedings, or legal claims are now pending against me. You may investigate and reverify the information in the application from time to time. Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. I understand that you will retain this application whether or not it is approved.

X _____ X _____
 APPLICANT'S SIGNATURE DATE CO-APPLICANT'S SIGNATURE DATE

Electronic Disclosures Agreement

Consent To Electronic Delivery of Disclosures

You have the right to receive certain disclosures at the time of application in a form that you may keep. By entering into this Agreement, you understand that the Bank will provide you with certain disclosures only in electronic form via email. You agree that any communication provided to you pursuant to the terms of this Agreement, and any future disclosures required by law, may be made electronically via an e-mail with attached disclosures. We will send all notices, attachments, and/or documents via e-mail to the last known e-mail address provided by you.

You understand that if you decide in the future that you would like to receive printed disclosures in the mail instead of receiving or obtaining disclosures or notices electronically, you agree to notify the Bank in person, via telephone or via U.S. Mail. Our telephone number and postal address are: (203)629-8400; The First Bank of Greenwich, Attention: Lending Department, 444 East Putnam Avenue, Cos Cob, CT 06807.

Withdrawing Your Consent

You may withdraw your consent to receive electronic disclosures or notices by notifying us at the telephone number or address listed in the "Consent to Electronic Delivery of Disclosures" section above. After you withdraw your consent, we will mail any required disclosures or notices to the address last known to us for your loan account. Your withdrawal of consent will apply to all disclosures and notices to which your consent applied. You agree that we have a reasonable amount of time to implement your withdrawal of consent to receive such electronic disclosures or notices and to begin sending printed documents to you.

Obtaining a Printed Disclosure or Notice

If you need to obtain a printed copy of disclosures or notices that have not been mailed to you because you have agreed to receive electronic versions instead, please call the Bank at (203)629-8400. The Bank will not charge a fee for this service.

Acknowledgement of Consent

I/We elect to receive disclosures or notices electronically*

Please use the following e-mail

address for such correspondence: _____@_____ .com

I/We elect not to receive disclosures or notices electronically **

BY: _____
Signature Date

BY: _____
Signature Date

*By consenting to these terms, you acknowledge and agree with the terms stated herein, and that you can access, view and retain the paperless documents described in PDF formats. You understand that you should contact the Lending Department to report any problems you may encounter.

**The Bank will send disclosures and notices via U.S Postal service to the address provided at application.

FACTS WHAT DOES THE FIRST BANK OF GREENWICH DO WITH YOUR PERSONAL INFORMATION

Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
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What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> • Social Security number and Account balances • Account transactions and Credit history • Payment history and Transaction or loss history <p>When you are no longer our customer, we continue to share your information as described in this notice.</p>
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How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons The First Bank of Greenwich chooses to share; and whether you can limit this sharing.
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Reasons we can share your personal information	Does The First Bank of Greenwich Share?	Can you limit this sharing?
For our everyday business purposes such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes information about your transactions and experiences	No	We don't share
For our affiliates' everyday business purposes information about your creditworthiness	No	We don't share
For nonaffiliates to market to you	No	We don't share

What we do

How does The First Bank of Greenwich protect my personal information?	<p>To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.</p> <p>We also maintain other physical, electronic and procedural safeguards to protect this information and we limit access to customer information to those employees for whom that information is appropriate.</p>
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How does The First Bank of Greenwich collect my personal information?	<p>We collect your personal information, for example, when you:</p> <ul style="list-style-type: none"> • apply for a loan or deposit money • open an account or pay your bills • use your credit or debit card
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Why can't I limit all sharing?	<p>Federal law gives you the right to limit only:</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes - information about your creditworthiness • affiliates from using your information to market to you • sharing for nonaffiliates to market to you
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Definitions

Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. <ul style="list-style-type: none">• <i>The First Bank of Greenwich has no affiliates.</i>
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. <ul style="list-style-type: none">• <i>The First Bank of Greenwich does not share with nonaffiliates so they can market to you.</i>
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. <ul style="list-style-type: none">• <i>The First Bank of Greenwich does not jointly market.</i>

Other important information

Please notify us if we report any inaccurate information about your account(s) to a consumer reporting agency. Your written notice describing the specifics of any inaccuracies should be sent to us at the following address:
The First Bank of Greenwich, 444 East Putnam Avenue, Cos Cob, CT 06807.

Questions?	Call (203) 629-8400 or go to www.greenwichfirst.com
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**MEMBER
FDIC**