

Ready Reserve Overdraft Protection Plan
FOR CONSUMER USE ONLY

You may apply for credit in your name alone, regardless of your marital status. However, (1) all owners of the associated checking account must jointly apply, and (2) if you want us to consider anyone else's future earnings, he or she and you must also jointly apply, regardless of your relationship to each other, if any.

You are applying in: Your name, alone
Your name and your spouse's or domestic partner's name
Your name along with (whose separate application is attached)

Your marital status is: Married or registered under the California Domestic Partnership Law Separated
Unmarried (includes single, divorced and widowed - does not include registered domestic partner)

CREDIT LIMITS: \$300 MINIMUM - \$5,000 MAXIMUM - BASED ON CREDIT APPROVAL

I AM APPLYING FOR A CREDIT LIMIT OF \$ _____

I understand that I must have a checking account at the Savings Bank of Mendocino County to be eligible for a Ready Reserve Overdraft Protection Plan. My Savings Bank checking account number is _____

For Bank Use Only:	<input type="checkbox"/> I	Amount Approved	Officer's Initial
	<input type="checkbox"/> E	_____	_____

Instructions To Married or Registered Domestic Partner Applicants: Answer all questions relating to you. Also answer all questions relating to your spouse or partner unless you are separated and your spouse or partner is not also applying for this loan. Unless you indicate otherwise, the Bank will assume that all property listed is community property and that all debts listed for you or your spouse or partner are community obligations.

APPLICANT	FIRST	MIDDLE	LAST	BIRTH DATE	SOCIAL SECURITY #		DMV LICENSE OR ID #	
	CURRENT ADDRESS			CITY	STATE	ZIP	ISSUED:	EXP:
	MAILING ADDRESS (IF DIFFERENT FROM ABOVE)			CITY	STATE	ZIP	HOW LONG AT CURRENT ADDRESS	
	HOME PHONE	CELL PHONE			EMAIL ADDRESS			_____ YRS _____ MOS
	CURRENT EMPLOYER			WORK PHONE NUMBER			HOW LONG	
	EMPLOYER'S ADDRESS			CITY	STATE	ZIP	ARE YOU SELF-EMPLOYED?	
	ADDITIONAL CURRENT EMPLOYER			PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS AT CURRENT)			NO YES IF YES, HOW MANY YEARS AND MONTHS	
	EMPLOYER'S ADDRESS			CITY	STATE	ZIP	NAME & TYPE OF BUSINESS	

SPOUSE / REGISTERED DOMESTIC PARTNER	FIRST	MIDDLE	LAST	BIRTH DATE	SOCIAL SECURITY #		DMV LICENSE OR ID #	
	CURRENT ADDRESS			CITY	STATE	ZIP	ISSUED:	EXP:
	MAILING ADDRESS (IF DIFFERENT FROM ABOVE)			CITY	STATE	ZIP	HOW LONG AT CURRENT ADDRESS	
	HOME PHONE	CELL PHONE			EMAIL ADDRESS			_____ YRS _____ MOS
	CURRENT EMPLOYER			WORK PHONE NUMBER			HOW LONG	
	EMPLOYER'S ADDRESS			CITY	STATE	ZIP	ARE YOU SELF-EMPLOYED?	
	ADDITIONAL CURRENT EMPLOYER			PREVIOUS EMPLOYER (IF LESS THAN 2 YEARS AT CURRENT)			NO YES IF YES, HOW MANY YEARS AND MONTHS	
	EMPLOYER'S ADDRESS			CITY	STATE	ZIP	NAME & TYPE OF BUSINESS	

INCOME	MONTHLY GROSS SALARY	APPLICANT'S INCOME	SPOUSE/DOMESTIC PARTNER'S INCOME
	DIVIDENDS AND INTEREST		
	<i>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.</i>		
	OTHER INCOME - DESCRIPTION AND AMOUNT	TOTAL \$ _____	\$ _____

CREDIT EXPERIENCE List ALL loans, leases, bank and other credit card accounts and other debts for which you or your spouse/domestic partner are or were responsible, including alimony, child support or separate maintenance obligations. List any account or line of credit available to you or your spouse/domestic partner whether or not either of you have used or are now using the account or line of credit. Also, if any credit or lease is under another name or jointly with other individuals, indicate names and social security numbers, if known. If more space is necessary check this box _____ and attach a separate sheet.

	A=APPLICANT S=SPOUSE OR DOMESTIC PARTNER	ACCOUNT #	FINANCIAL INSTITUTION	MONTHLY/ PAYMENT	BALANCE	CREDIT LIMIT
TOTAL OF ALL MORTGAGE PAYMENTS						N/A
RENT / MOBILE SPACE RENT						
ALIMONY / SEPARATE MAINTENANCE						
CHILD SUPPORT						

Are all debts listed?	Yes	No
Is any debt past due?	Yes	No
Have you or your spouse/domestic partner ever filed for bankruptcy?	Yes	No
Have you or your spouse/domestic partner ever voluntarily surrendered or had a vehicle repossessed, or a property foreclosed?	Yes	No
Are you or your spouse/domestic partner a co-signer or guarantor on any loan or contract not shown above?	Yes	No
Are there any unsatisfied judgments against you or your spouse/domestic partner?	Yes	No
Is there anything now known which would reduce or stop the income shown above before this loan matures and is fully paid?	Yes	No

If answer is YES to any of these questions, attach separate sheet giving full details.

By signing, you: 1. Certify that the above information is true and complete as of the date below. 2. Agree that this application is the property of the Bank and need not be returned to you. 3. Authorize the Bank to verify the accuracy and completeness of all information above from any source the Bank chooses. If you are married or are a registered domestic partner and are applying for this loan in your name alone, this authorization extends to verifying information about your spouse or partner. 4. Authorize the Bank to answer questions from, and furnish information to, others about the Bank's experience with you.

Applicant's Signature

Date

Signature of Spouse or Registered Domestic Partner

Date

THIS PERSON SHOULD NOT SIGN UNLESS JOINTLY APPLYING FOR THIS LOAN