



FIRST
COMMUNITY
BANK
OF SOUTHWEST FLORIDA

CONSUMER LOAN APPLICATION

Please mail or take your completed application package to a
First Community Bank of Southwest Florida location nearest you.
Visit our website at <http://www.fcb-yourbank.com/aboutus/aboutus.html>
for a list of our branch locations.

Thank you for giving *First Community Bank of Southwest Florida* the chance to surpass all your banking expectations!

We appreciate your giving us the opportunity to be your premier financial provider. Our goal is simple, to meet your individual financial needs. We strive to deliver the ultimate in personalized customer service from start to finish, you are never just a number to us, and your phone call will never be answered in another country! We know what customer service is and we look forward to providing you with it!

To allow us to make a timely and accurate financial decision on your credit request(s) we will need the following information to be submitted:

- Completed Consumer Application
- Borrower's Certification & Authorization
- If you are a salaried employee:
Original pay stubs for the most recent 30 day period for each borrower*
Last years W-2 forms for each borrower
- If you are self-employed or if overtime, bonus or commission income exceeds 25% of total income:
Last years complete personal tax return, including all schedules, signed by borrower. You must also include copies of last years corporate and/or partnership returns, along with a Year to Date Profit and Loss Statement if the application is dated more than 120 days after the end of business tax year (All returns and statements must be signed by you).
- Copy of applicant(s) Driver's License or Passport and secondary form of ID
(health insurance card, utility bill, property tax billing, birth certificate, a college photo id, social security card, organizational membership card, firearm license)
This information is needed in accordance with the Bank Secrecy Act (BSA) and Customer Identification Program (CIP) under the USA Patriot Act. The information will be kept strictly confidential and will not be used in obtaining any credit decision.
- Copy of insurance policy covering the collateral

You do not need to include the following information if you do not wish to have it considered as a basis for repaying the obligation.

If you receive social security, disability, retirement, VA compensation or welfare income:

- () Copy of latest awards letter stating amount of income and length of time it will continue
- () Copy of your last 3 months bank statements showing deposits or copy of your most recently received check

If you receive note income:

- () Copy of the note along with last years tax return showing income received

If you are using child support or alimony to qualify for the loan and have been receiving it for at least 12 months, or if you are paying child support or alimony:

- () Final Divorce Decree, Property Settlement Agreement and documentation showing receipt of income

We would like to thank you for giving First Community Bank of Southwest Florida the opportunity to serve your financial needs.

CONSUMER CREDIT APPLICATION

Date Bank Rec'd _____

TYPE OF CREDIT REQUESTED

Secured Unsecured

- Individual Credit – relying on my income or assets.
- Individual Credit – relying on my income or assets as well as income or assets from other sources.
- Joint Credit



Date of Application _____
 Amount \$ _____ How Long _____
 Payment Date Desired _____
 Want to Repay Monthly _____
 Purpose _____
 Acct. No. _____ Class _____

SECTION A – INDIVIDUAL APPLICANT INFORMATION

Last _____ First _____ M.I. _____
 Name _____ Birth Date ____/____/____ Tel. No. _____ Soc. Sec. No. _____
 Present Address _____ City _____ State _____ Zip _____ County _____ How Long _____
 Previous Address _____ City _____ State _____ Zip _____ County _____ How Long _____
 Have you applied for credit with us before? No Yes – When? _____ No. Dep. _____ Dep. Ages _____
 Name of Nearest Relative Not Living With You _____ Relationship _____
 Address _____ Tel. No. (____) _____
 Employer (Company Name & Address) _____ How Long _____
 Bus. Tel. _____ Position / Title _____ How Often Paid _____ Take Home Salary Per Month \$ _____
 Previous Employer (Company Name & Address) _____ How Long _____
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.
Alimony, child support, separate maintenance received under: Court Order Written Agreement Oral Understanding
 Sources of Other Income _____ Amount Per Month \$ _____

SECTION B – JOINT APPLICANT OR OTHER PARTY INFORMATION

Last _____ First _____ M.I. _____
 Name _____ Birth Date ____/____/____ Tel. No. _____ Soc. Sec. No. _____
 Present Address _____ City _____ State _____ Zip _____ County _____ How Long _____
 Relationship to Applicant (If Any) _____ Have you applied for credit with us before? No Yes – When? _____ No. Dep. _____
 Dep. Ages _____
 Name of Nearest Relative Not Living With You _____ Relationship _____
 Address _____ Tel. No. (____) _____
 Employer (Company Name & Address) _____ How Long _____
 Bus. Tel. _____ Position / Title _____ How Often Paid _____ Take Home Salary Per Month \$ _____
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.
Alimony, child support, separate maintenance received under: Court Order Written Agreement Oral Understanding
 Sources of Other Income _____ Amount Per Month \$ _____

SECTION C – MARITAL STATUS

Complete only if: for joint or secured credit, or applicant resides in a community property state or is relying on property located in such a state.
 (*includes single, divorced and widowed)
Applicant Married Separated Unmarried* **Other Party** Married Separated Unmarried*

SECTION D – ASSET & DEBT INFORMATION

If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Person. Please mark Applicant-related information with an "A." If Section B was not completed, only give information about the Applicant in this Section.

ASSETS OWNED (Use separate sheet if necessary.)

DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	VALUE
Checking Account Number(s) (where)		\$
Savings Account Number(s) (where)		
Other Assets (describe)		
TOTAL ASSETS		\$

OUTSTANDING DEBTS (including charge accounts, installment contracts, credit cards, rent, mortgages and other obligations. Use separate sheet if necessary.)

CREDITOR	ACCOUNT NUMBER	NAME THE ACCT. IS UNDER	ORIGINAL AMT.	PRESENT BALANCE	MO. PAYMENTS
Landlord or Mortgage Holder	<input type="checkbox"/> Rent Pymt. <input type="checkbox"/> Mortgage		(OMIT RENT) \$	(OMIT RENT) \$	\$
Automobiles (make, model, year)					
TOTAL DEBTS			\$	\$	\$

Complete the following information about both the Applicant and Joint Applicant or Other Person (if applicable):

Are you obligated to make Alimony, Support or Maintenance Payments? No Yes
 If yes, to (Name & Address _____) Amount Per Month \$ _____
 Are you a comaker, endorser, or guarantor on any loan or contract? No Yes If yes, for whom? _____ To whom? _____
 Are there any unsatisfied judgments against you? No Yes If yes, to whom owed? _____ Amount \$ _____
 Have you been declared bankrupt in the last 10 years? No Yes If yes, where? _____ Year? _____

SECTION E – SECURED CREDIT

Complete only if credit is to be secured. Briefly describe the property to be given as security and indicated if others have an ownership interest.

Property Description: _____
 Names & Addresses of all co-owners of the property: _____
 If the security is real estate, give the full name of your spouse (if any): _____

SIGNATURES – I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit and employment history and to answer questions other may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature _____

Date _____

Other Signature (Where Applicable) _____

Date _____

CERTIFICATION AND AUTHORIZATION

Applicant:

Lender:

**First Community Bank of Southwest Florida
1565 Red Cedar Drive
Fort Myers, Florida 33907-7686
(239) 939-4100**

CERTIFICATION

To First Community Bank of Southwest Florida ("Lender"):

1. Applicant (and co-applicant if applicable), _____ has applied for a loan from Lender. In applying for the loan, Applicant provided to Lender various information about Applicant and the requested loan, such as the amount and source of any downpayment, income information, and assets and liabilities. Applicant certifies that all of the information is true and complete. Applicant made no misrepresentations to Lender, nor did Applicant omit any important information.
2. Applicant understands and agrees that Lender may verify any information provided to Lender concerning Applicant's application, including, but without limitation, verifications from financial institutions of the information provided.
3. Applicant fully understands that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this loan, as applicable under the provisions of Title 18, United States Code, Section 1014.

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. Applicant has applied for a loan from First Community Bank of Southwest Florida ("Lender"). As part of the application process, Lender, any insurer of the loan and any collateral title insurer may verify information Applicant provided to Lender either before or after the loan is closed.
2. Applicant authorizes you to provide to Lender, to any investor to whom Lender may sell Applicant's loan, and to any insurer of the loan any and all information and documentation that they may request. Such information may include, but is not limited to, income; bank, money market, and similar account balances; credit history; and copies of income tax returns.
3. Lender, any investor that purchases the loan, and any insurer of the loan may address and send this authorization to any person or company named in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to First Community Bank of Southwest Florida, to any investor that purchases the loan, and to any insurer of the loan is appreciated.

AUTHORIZATION TO FILE FINANCING STATEMENT

Applicant hereby authorizes Lender to file the appropriate Financing Statements for the following collateral prior to executing a security agreement, pledge, or control agreement: _____

APPLICANT:

X

Applicant

Date

X

Co-Applicant

Date



FIRST
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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.