

Amount \$	Type <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured	Rate	Term	Date Received	Interviewer
<b>Purpose of Loan</b> <input type="checkbox"/> Automobile <input type="checkbox"/> Home Improvement <input type="checkbox"/> Debt Consolidation <input type="checkbox"/> Other: _____				<b>Will you be purchasing Credit Insurance?</b> <input type="checkbox"/> Single Life <input type="checkbox"/> Joint Life <input type="checkbox"/> Disability	
If secured, describe consumer goods securing this loan:					
Vehicle: <input type="checkbox"/> New <input type="checkbox"/> Used	Year	Make and Model	Type	Vehicle ID or Serial Number	
Savings/Certificate of Deposit: Account # Value \$			OTC Stock: Market Value \$		
Real Property: Property address (street, city, state, ZIP)		Value \$	Dwelling is: <input type="checkbox"/> Stick Built/Modular <input type="checkbox"/> Mobile Home Year _____		<input type="checkbox"/> Primary Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Other

Check here if you are applying for individual credit in your own name and are 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.

Check here if you are applying for joint credit with another person and provide information about the joint applicant.

We intend to apply for joint credit \_\_\_\_\_  
 Applicant Co-Applicant

Check here if you are applying for individual credit, but are 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 all Sections to the extent possible, providing information about the person on whose alimony, support, or maintenance payments or income or assets you are relying.

APPLICANT			CO-APPLICANT						
Name			Name						
Social Security No.		Date of Birth	Social Security No.		Date of Birth				
Home Phone:			Home Phone:						
Mailing Address			Mailing Address						
Street			Street						
City		State	City		State				
Zip			Zip						
Physical Location (if different from Mailing)			Physical Location (if different from Mailing)						
Street			Street						
City		State	City		State				
Zip			Zip						
Years There	Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> With Family		Years There	Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> With Family					
Mortgage Holder/Landlord		Payment Amount \$	Mortgage Holder/Landlord		Payment Amount \$				
Previous Address (if less than 2 years at present) City, State, Zip Code			Previous Address (if less than 2 years at present) City, State, Zip Code						
_____			_____						
Years There	Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> With Family		Years There	Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> With Family					
APPLICANT			EMPLOYMENT			CO-APPLICANT			
Employer Name & Address			Employer Name & Address			Employer Name & Address			
Position/Type of Business		<input type="checkbox"/> Self Employed	No. of Years	Position/Type of Business		<input type="checkbox"/> Self Employed	No. of Years	Position/Type of Business	
Business Phone:			Business Phone:			Business Phone:			
Previous Employer (if less than 2 years at present) Name & Address			Previous Employer (if less than 2 years at present) Name & Address			Previous Employer (if less than 2 years at present) Name & Address			
Position/Type of Business		No. of Years	Position/Type of Business		No. of Years	Position/Type of Business		No. of Years	
APPLICANT			MONTHLY INCOME			CO-APPLICANT			
Gross Income:	\$		Gross Income:	\$		Gross Income:	\$		
Social Security / Retirement:	\$		Social Security / Retirement:	\$		Social Security / Retirement:	\$		
Dividends/Interest:	\$		Dividends/Interest:	\$		Dividends/Interest:	\$		
Other Income:	\$		Other Income:	\$		Other Income:	\$		
<b>Total:</b>	<b>\$</b>		<b>Total:</b>	<b>\$</b>		<b>Total:</b>	<b>\$</b>		
<b>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.</b> Income \$ _____ Source _____ Income \$ _____ Source _____			<b>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.</b> Income \$ _____ Source _____ Income \$ _____ Source _____			<b>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.</b> Income \$ _____ Source _____ Income \$ _____ Source _____			
<b>Marital Status (complete only if joint or secured credit)</b> <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated			<b>Marital Status (complete only if joint or secured credit)</b> <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated			<b>Marital Status (complete only if joint or secured credit)</b> <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated			

<b>Nearest Relative:</b> _____ <b>Address:</b> _____ <b>Phone:</b>			<b>Nearest Relative:</b> _____ <b>Address:</b> _____ <b>Phone:</b>			
COMBINED APPLICANT & CO-APPLICANT ASSETS			COMBINED APPLICANT & CO-APPLICANT LIABILITIES			
Assets		Cash or Market Value	Liabilities			
Name of Bank or Financial Institution:	Account Number		List ALL creditors, including banks, finance companies, credit cards and co-signed loans. Also include any obligations to pay child support, alimony or separate maintenance. If necessary, add additional sheets.			
		\$	Creditor	Loan Type	Balance	Payment
		\$			\$	\$
		\$			\$	\$
Stocks, Bonds & Investments					\$	\$
		\$			\$	\$
		\$			\$	\$
Life insurance net cash value Face amount: \$		\$			\$	\$
Subtotal Liquid Assets		\$			\$	\$
Other Assets (itemize)		\$			\$	\$
		\$			\$	\$
		\$			\$	\$
Total Assets		\$	Total Liabilities			

This notice is being provided by GUARANTEE TRUST LIFE INSURANCE COMPANY in accordance with the requirements of the Insurance Information and Privacy Protection law in effect (if required) in your state of residence.

Your application, in most instances, gives us all needed information. However, in some cases, we may need to obtain more information by contacting other sources. This information, as well as other personal or privileged information collected, may in certain circumstances, be disclosed to third parties without your authorization, but only to the extent permitted by law. You have the right to access and correct recorded personal information in our file (but not privileged information) by writing to us.

This notice is not intended to be a complete description of your rights. For a complete description of our information practices, please write:

**Guarantee Trust Life Insurance Company**  
**1275 Milwaukee Avenue**  
**Glenview, Illinois 60025**

I authorize Camden National Bank (the "Bank") to make any credit, employment or investigation inquiry that the Bank determines appropriate for the extension of credit or the collection of amounts owed to the Bank. The Bank can furnish information concerning my account to consumer reporting agencies and others who may properly receive that information. I certify that no essential information has been concealed and that no misrepresentations have been made in this application. I agree that this application will remain the property of the Bank.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

