



BISCAYNE BANK

PH (305) 447-5050 | www.biscaynebank.com

INSTALLMENT CREDIT APPLICATION

PLEASE PRINT - USE INK - ANSWER ALL QUESTIONS

AMOUNT REQUESTED	TERM/MONTH	LOAN TYPE	<input type="checkbox"/> Personal Unsecured <input type="checkbox"/> Personal Secured	<input type="checkbox"/> New Auto <input type="checkbox"/> Used Auto	<input type="checkbox"/> 2nd Mortgage <input type="checkbox"/> Boat	<input type="checkbox"/> Personal Credit Line <input type="checkbox"/> Other
LOAN PURPOSE		COLLATERAL TO BE FINANCED	PURCHASE PRICE	DOWN PAYMENT	SELLER (Name & Phone No.)	
INSURANCE COMPANY			AGENT/PHONE			

INDIVIDUAL APPLICATION -Credit sought in your own name - complete all information
 JOINT CREDIT -If you are applying for joint credit with another person - complete the joint application Section.
 Individual Application - But relying in whole or in part on income from alimony, child support, or separate maintenance or the income or assets of another person.
Provide information about that person, to the extent you can in the joint section
 Co-Maker Name of applicant _____

APPLICANT			
LAST NAME	FIRST NAME	M.I.	
STREET ADDRESS			
CITY/STATE/ZIP		HOME PHONE	
DATE OF BIRTH	SOCIAL SECURITY	Dependents	
		NO.	AGES
LANDLORD/MORTGAGE HOLDER NAME AND ADDRESS		NO. YEARS	RENT <input type="checkbox"/> OWN <input type="checkbox"/>
DATE PURCHASED	PURCHASE PRICE	ORIGINAL MORTGAGE	
PRESENT BALANCE	FMV	MONTHLY PAYMENT	
PREVIOUS ADDRESS (IF AT PRESENT ADDRESS LESS THAN 5 YEARS)		RENT <input type="checkbox"/> OWN <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
APPLICANT'S EMPLOYER	YEARS	POSITION	
EMPLOYER'S ADDRESS	PHONE #		
GROSS MONTHLY SALARY		OTHER INCOME	
GROSS	NET		
*SOURCE OF OTHER INCOME		YEARS	
PREVIOUS EMPLOYER (IF WITH PRESENT LESS THAN 5 YEARS)	YEARS	POSITION	
PREVIOUS EMPLOYERS ADDRESS	PHONE #		

JOINT APPLICANT			
LAST NAME	FIRST NAME	M.I.	
STREET ADDRESS			
CITY/STATE/ZIP		HOME PHONE	
DATE OF BIRTH	SOCIAL SECURITY	Dependents	
		NO.	AGES
LANDLORD/MORTGAGE HOLDER NAME AND ADDRESS		NO. YEARS	RENT <input type="checkbox"/> OWN <input type="checkbox"/>
DATE PURCHASED	PURCHASE PRICE	ORIGINAL MORTGAGE	
PRESENT BALANCE	FMV	MONTHLY PAYMENT	
PREVIOUS ADDRESS (IF AT PRESENT ADDRESS LESS THAN 5 YEARS)		RENT <input type="checkbox"/> OWN <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
APPLICANT'S EMPLOYER	YEARS	POSITION	
EMPLOYER'S ADDRESS	PHONE #		
GROSS MONTHLY SALARY		OTHER INCOME	
GROSS	NET		
*SOURCE OF OTHER INCOME		YEARS	
PREVIOUS EMPLOYER (IF WITH PRESENT LESS THAN 5 YEARS)	YEARS	POSITION	
PREVIOUS EMPLOYERS ADDRESS	PHONE #		

*** INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE NEED NOT TO BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED FOR REPAYING THIS OBLIGATION, IF YOU WISH TO REVEAL SUCH INCOME:**

HOW MUCH DO YOU RECEIVE MONTHLY \$ _____ UNDER COURT ORDER \$ _____ UNDER WRITTEN AGREEMENT \$ _____ UNDER ORAL AGREEMENT \$ _____

NAME AND ADDRESS OF RELATIVE/FRIEND NOT LIVING WITH YOU	PHONE	RELATIONSHIP
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FINANCIAL INFORMATION		
CHECKING ACCOUNT #	BANK AND ADDRESS	BALANCE
CHECKING ACCOUNT #	BANK AND ADDRESS	BALANCE
PRESENT CARS OWNED OR LEASED (YEAR, MAKE, MODEL)	FINANCED BY	BALANCE
		PAYMENT

CREDIT INFORMATION (LIST OPEN AND RECENTLY CLOSED ACCOUNTS WITH BANKS, LOAN COMPANIES, CREDIT UNIONS, STORES, CREDIT CARDS, ETC.)

CREDITOR NAME	ORIGINAL BALANCE	PRESENT BALANCE	MONTHLY PAYMENT

ARE YOU A CO-MAKER OR ENDORSER ON ANY OTHER NOTES? YES NO

ARE YOU OBLIGATED TO PAY ALIMONY/CHILD SUPPORT OR SEPARATE MAINTENANCE? _____ MONTHLY AMOUNT REQUIRED _____

CERTIFICATION: I/WE CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT AS OF THE DATE SET FORTH OPPOSITE MY/OUR SIGNATURE(S) ON THIS APPLICATION AND ACKNOWLEDGE MY/OUR UNDERSTANDING THAT ANY INTENTIONAL OR NEGLIGENT MISREPRESENTATION(S) OF THE INFORMATION IN THIS APPLICATION MAY RESULT IN CIVIL LIABILITY AND/OR CRIMINAL PENALTIES INCLUDING, BUT NOT LIMITED TO, FINE OR IMPRISONMENT OR BOTH UNDER THE PROVISIONS OF TITLE 18, UNITED STATES CODE, SECTION 101, ET SEQ. AND LIABILITY FOR MONETARY DAMAGES TO THE LENDER, ITS AGENTS, SUCCESSORS AND ASSIGNS, INSURERS AND ANY OTHER PERSON WHO MAY SUFFER ANY LOSS DUE TO RELIANCE UPON ANY MISREPRESENTATION WHICH I/WE MAY HAVE MADE ON THIS APPLICATION. I (WE) AGREE, IF ANY MATERIAL CHANGE OCCURS, TO IMMEDIATELY NOTIFY YOU AND UNLESS YOU ARE SO NOTIFIED, YOU MAY CONTINUE TO RELY UPON THIS STATEMENT. I (WE) AUTHORIZE YOU TO MAKE WHATEVER CREDIT INQUIRIES YOU MAY DEEM NECESSARY IN CONNECTION WITH THIS CREDIT APPLICATION.

I.D. OF APPLICANT	JOINT APPLICANT, I.D. OF JOINT APPLICANT		
APPLICANT'S SIGNATURE	DATE	JOINT APPLICANT'S SIGNATURE	DATE

ONLY TO BE COMPLETED WHEN LOAN REQUEST IS SECURED BY REAL ESTATE OR A MOBILE HOME.

The following information is requested by the Federal Government for certain types of loans related to dwelling, in order to motor the Lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may neither discriminate on the basis of this information, nor whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for.)

APPLICANT	JOINT-APPLICANT
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
Race/National Origin:	Race/National Origin:
<input type="checkbox"/> Amerian Indian or Alaskan Native	<input type="checkbox"/> Amerian Indian or Alaskan Native
<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> Asian or Pacific Islander
<input type="checkbox"/> White, not of Hispanic Origin	<input type="checkbox"/> White, not of Hispanic Origin
<input type="checkbox"/> Black, not of Hispanic	<input type="checkbox"/> Black, not of Hispanic
<input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Other (Specify)
Sex:	Sex:
<input type="checkbox"/> Female	<input type="checkbox"/> Female
<input type="checkbox"/> Male	<input type="checkbox"/> Male