



441 North 7<sup>th</sup> Avenue  
Scranton, PA 18503  
Phone: 570-342-2720  
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# CREDIT LINE ACCOUNT AND PERSONAL LOAN APPLICATION

ACCOUNT NUMBER – APPLICANT

ACCOUNT NUMBER – CO-APPLICANT

DATE

## Applicant Information PRINT OR TYPE ALL INFORMATION

### 1. If You live in a community property state, are You:

☐ Married ☐ Separated ☐ Unmarried (Includes Single, Divorced and Widowed)

### 2. Married applicants can apply for individual credit. Indicate if You would like:

☐ Individual Credit ☐ Joint Credit with Your Spouse/Co-Applicant

### 3. Method of Payment: ☐ Payroll Deduction ☐ Automatic Share Transfer ☐ Cash Payment

## Credit Applied For:

Type of credit \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_

Purpose \_\_\_\_\_ Collateral Offered \_\_\_\_\_

## Spouse/Co-Applicant Information

### 4. Complete Spouse/Co-Applicant Information only if:

- a. This is for joint credit with Your Spouse or other Co-Applicant;
- b. Your Spouse will use Your Account;
- c. You are relying on Your Spouse's income as a source of repayment for the credit requested; or
- d. You live in a community property state: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, Wisconsin (or Puerto Rico).

### 5. Definitions:

Whenever used in this application, the words "You" and "Your" refer to the Applicant(s) or Spouse/Co-Applicant and the words "We," "Us," and "Our" refer to the Lender.

Please refer to the Important Credit Card Disclosures located on Page 3.

☐ APPLICANT ☐ CO-SIGNER/GUARANTOR

FIRST NAME	INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER		BIRTHDATE	
CURRENT STREET ADDRESS	APT. NO.	YEARS THERE	
CITY	STATE	ZIP	
EMAIL ADDRESS		CELL PHONE	
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 2 YEARS)		YEARS THERE	
DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	HOME PHONE	NO. OF DEP.	AGES OF DEPENDENTS
NAME, ADDRESS AND TELEPHONE OF PERSONAL REFERENCE NOT LIVING WITH YOU			

## SPOUSE/CO-APPLICANT

FIRST NAME	INITIAL	LAST NAME	
SOCIAL SECURITY NUMBER		BIRTHDATE	
CURRENT STREET ADDRESS	APT. NO.	YEARS THERE	
CITY	STATE	ZIP	
EMAIL ADDRESS		CELL PHONE	
FORMER ADDRESS (COMPLETE IF PREVIOUS ADDRESS IS LESS THAN 2 YEARS)		YEARS THERE	
DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	HOME PHONE	NO. OF DEP.	AGES OF DEPENDENTS
NAME, ADDRESS AND TELEPHONE OF PERSONAL REFERENCE NOT LIVING WITH YOU			

## EMPLOYMENT AND INCOME If self-employed, attach financial statement or income tax returns.

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		EMPLOYMENT DATE
ADDRESS/CITY/STATE/ZIP		SUPERVISOR'S NAME
WORK PHONE	POSITION	MO. GROSS INCOME
FORMER EMPLOYER	POSITION	YEARS THERE

CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE)		EMPLOYMENT DATE
ADDRESS/CITY/STATE/ZIP		SUPERVISOR'S NAME
WORK PHONE	POSITION	MO. GROSS INCOME
FORMER EMPLOYER	POSITION	YEARS THERE

## OTHER INCOME You need not list income from alimony, child support or separate maintenance payments unless You want it considered in evaluating this credit application.

TYPE OF OTHER INCOME	MONTHLY AMOUNT
NAME AND ADDRESS OF PAYER	

TYPE OF OTHER INCOME	MONTHLY AMOUNT
NAME AND ADDRESS OF PAYER	

## ASSETS AND DEPOSITS Attach a separate sheet if necessary.

DESCRIPTION	ACCOUNT NUMBER/TYPE	BALANCE/VALUE

DESCRIPTION	ACCOUNT NUMBER/TYPE	BALANCE/VALUE

**CREDIT INFORMATION** Please list all open accounts with or without a balance. Attach separate sheet if necessary.

**A=Applicant/Co-Signer/Guarantor      C=Spouse/Co-Applicant**  
**D=Debts to be paid off if loan is granted.**

[illegible]

Please answer the following questions. If a yes answer is given, explain on attached sheet.		A		C		TOTALS							
		YES	NO	YES	NO								
1. Have You filed a petition for bankruptcy in the last 10 years?						Please Check: A=Applicant/Co-Signer/Guarantor C=Co-Applicant		YES	A	NO	C	YES	NO
2. Have You ever had any auto, furniture or property repossessed?						6. Have You any Obligations not listed?							
3. Are You a co-maker or co-signer on any loan? For Whom _____ Amount \$ _____						7. Do You have any past due bills?							
						8. Is any income You have listed likely to reduce in the next 2 years?							
4. Have You ever had credit in any other name? What name _____						9. Indicate immigration status:							
5. Have You any suits pending, judgments filed, alimony or support awards against You?						Applicant <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent U.S. Resident <input type="checkbox"/> Other _____							
						Co-Applicant <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent U.S. Resident <input type="checkbox"/> Other _____							

**OPTIONAL DEBT CANCELLATION** An appropriate application/disclosure will be furnished at the time Your credit is approved.

PLEASE CHECK ONE OF THE BOXES BELOW.

You are interested in Debt Cancellation ☐

You are not interested in Debt Cancellation ☐

## SIGNATURES

You warrant the truth of the above information and You realize that it will be relied upon by Us in deciding whether or not to grant the credit applied for. You hereby authorize Us, Our employees and agents to investigate and verify any information provided to Us by You. If this application is for any Feature Category contained in Our Credit Line Account Program, You agree and understand that if approved, You are contractually liable according to the applicable terms of the Credit Line Account Agreement and Disclosure. You acknowledge receiving a copy of that Agreement prior to the time of Your first advance, and You promise to pay all amounts charged to Your Account according to its terms. If this is a joint application, You agree that such liability is joint and several. **If You are issued a Credit Card, ATM card or debit card, by signing below, You grant and consent to a lien on Your shares with Us (except those deposits established under a governmental approved tax deferral plan such as IRA and Keogh accounts) and any dividends due or to become due to You from Us to the extent You owe on any unpaid Credit Card balance and/or Overdraft Line of Credit balance created through the use of Your ATM card or debit card.**

You hereby acknowledge Your intent to apply for joint credit\_\_\_\_\_

**X**  
Signature of Applicant/Co-Signer/Guarantor \_\_\_\_\_ Date \_\_\_\_\_

**X**  
\_\_\_\_\_  
Signature of Spouse/Co-Applicant Date

**LOAN OFFICER**

LOAN APPROVED ☐ YES ☐ NO

SPECIFIC REASON(S) FOR REJECTION/APPROVAL

LOAN OFFICER SIGNATURE

DATE \_\_\_\_\_

CREDIT LIMIT \$

OTHER APPROVED CREDIT LIMIT \$

☐ ECOA NOTICE AND REASON FOR REJECTION OR UNACCEPTED COUNTER OFFER SENT OR DELIVERED ON \_\_\_\_\_

(DATE) BY \_\_\_\_\_

**IMPORTANT CREDIT CARD DISCLOSURES.** The following disclosure represents important details concerning Your Credit Card. The information about costs of the Card is accurate as of the effective date of \_\_\_\_\_. You can call Us at (570) 342-2720 or write Us at 851 Commerce Boulevard, Dickson City, PA 18519 to inquire if any changes have occurred since the effective date.

Interest Rate and Interest Charges	
<b>Annual Percentage Rate For Purchases</b>	<p>MasterCard Platinum: _____% - _____% when You open Your account, based on Your creditworthiness.</p> <p>Secured MasterCard Platinum: _____% - _____% when You open Your account, based on Your creditworthiness.</p>
<b>Annual Percentage Rate For Balance Transfers</b>	<p>MasterCard Platinum: _____% - _____% when You open Your account, based on Your creditworthiness.</p> <p>Secured MasterCard Platinum: _____% - _____% when You open Your account, based on Your creditworthiness.</p>
<b>Annual Percentage Rate For Cash Advances</b>	<p>MasterCard Platinum: _____% - _____% when You open Your account, based on Your creditworthiness.</p> <p>Secured MasterCard Platinum: _____% - _____% when You open Your account, based on Your creditworthiness.</p>
<b>Paying Interest</b>	We will not charge You interest on purchases if You pay Your entire balance owed each month within 25 days of Your statement closing date.
<b>For Credit Card Tips from the Consumer Financial Protection Bureau</b>	<b>To learn more about factors to consider when applying for or using a Credit Card, visit the website of the Consumer Financial Protection Bureau at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a>.</b>
Fees	
<b>Penalty Fees</b>	
<ul style="list-style-type: none"> <li>Late Payment</li> <li>Returned Payment</li> </ul>	<p>Up to <b>\$8.00</b></p> <p>Up to <b>\$29.00</b></p>

**How We Will Calculate Your Balance:** We use a method called "average daily balance (including new purchases)."