

**Checking Reserve  
MINI-APPLICATION**

*Bring this form to Citizens Bank & Trust and we'll have  
an answer to your request very shortly!*

*Thanks for supporting our community bank!*

**CB Checking Account Number** \_\_\_\_\_ **Account Open Date** \_\_\_\_\_

**Loan Amount Requested**     \$100     \$200     \$300     \$500     Other \$ \_\_\_\_\_

**Trigger Balance**     Zero     \$200

**Joint Credit** - We intend to apply for joint credit (initials) \_\_\_\_\_

**Name** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Employer** \_\_\_\_\_ **How Long Employed** \_\_\_\_\_ **Gross Monthly Salary \$** \_\_\_\_\_

**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  
**Amount per month \$** \_\_\_\_\_

**Joint Applicant**

**Name** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Employer** \_\_\_\_\_ **How Long Employed** \_\_\_\_\_ **Gross Monthly Salary \$** \_\_\_\_\_

**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  
**Amount per month \$** \_\_\_\_\_

**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 others 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

\_\_\_\_\_  
Joint Applicant's Signature

\_\_\_\_\_  
Date

**FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE**

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. My agreement not to obtain or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Applicant's Signature

\_\_\_\_\_  
Date