LEGACY BANK CREDIT APPLICATION

NOTICE: Upon the approval of the loan request, it will be necessary for all parties to the loan to complete the loan transaction at a Legacy Bank near you.

I certify that this application is for:

☐ **individual credit** - without a co-borrower or guaranty of another person or entity*
☐ **joint credit** - with a person or entity who will also be contractually liable

Any future unwritten loan requests will be on the same application basis (either individual or joint) unless the bank is notified in writing prior to or at the time of the new application.

Please initial: **Applicant** _____
Co-applicant _____

* In the event Borrower(s) has previous credit with Lender whereby a Guarantor(s) was required, Borrower(s) is requesting the continuing Guaranty(ees) be considered for this loan application unless this box is checked: ☐

TELL US ABOUT YOUR LOAN NEED

Purpose of Loan:	Amount of Loan Requested:	Payment Request: ☐ Month ☐ Annual ☐ Other
Collateral:	Date of Payment:	Type of Loan: ☐ Personal, Family or Household ☐ Business or Investment
Marital Status (Complete only if applying for secured credit): Applicant: ☐ Married ☐ Unmarried ☐ Separated Co-applicant: ☐ Married ☐ Unmarried ☐ Separated		

TELL US ABOUT YOURSELF

Applicant Name:		Social Security Number:	
Driver's License Number:	Date of Birth:	Email Address:	Phone Number:
Cell Number:	☐ Rent ☐ Own ☐ Other	Rent/House Payment:	Age of Dependents:
Present Mailing Address AND Residence Street Address (If different):		Years and Months at Current Address:	
Previous Address:		Years and Months at Previous Address:	
Firm Name or Employer (Retired? ☐ Yes ☐ No):		Position or Military Rank:	Gross Pay or Pension: ☐ Week ☐ Month ☐ Other
Business Address:		Business Phone Number:	Length of Present Employment:

Previous Employeer Name and Address:	Business Phone Number:	Length of Previous Employment:
Other Sources of Income: (Alimony, child support, or separate maintenance income need not be disclosed if you do not wish to have it considered as a basis of repaying this obligation)		Amount Monthly:
Name of Most Closely Related Person Not Living With You:	Address of This Person:	Phone Number:
Name of Personal Reference (Non-relative):	Address of This Person:	Phone Number:

TELL US ABOUT YOUR LOAN CO-APPLICANT (If Applicable)

Co-applicant Name:		Present Mailing Address AND Residence Street Address:	
Social Security Number:	Date of Birth:	Email Address:	Driver's License Number:
Phone Number:		Cell Number:	
Firm Name or Employer (Retired? ☐ Yes ☐ No):	Position or Military Rank:	Gross Pay or Pension: ☐ Week ☐ Month ☐ Other	
Business Address:	Business Phone Number:	Length of Present Employment:	
Other Sources of Income: (Alimony, child support, or separate maintenance income need not be disclosed if you do not wish to have it considered as a basis of repaying this obligation)		Amount Monthly:	
Name of Most Closely Related Person Not Living With You:	Address of This Person:	Phone Number:	
Name of Personal Reference (Non-relative):	Address of This Person:	Phone Number:	

TELL US ABOUT YOUR BANKING REFERENCES

Your Bank Is:	Other Financial Institutions Used:
Services Presently Used: ☐ Checking Account ☐ Savings Account ☐ Loan ☐ Safe Deposit ☐ Certificate of Deposit ☐ Other	

Do you have any unsatisfied judgements against you or your co-applicant? ☐ Yes ☐ No	If yes, how much:
If you are obligated to pay alimony or child support, list monthly amount:	Are you paying under: ☐ Court Order ☐ Written Agreement ☐ Oral Understanding
Have you had a vehicle or merchandise repossessed in the past seven years? ☐ Yes ☐ No	
Have you had a bankruptcy in the past 14 years? ☐ Yes ☐ No If yes, when:	
Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, when:	

TELL US ABOUT YOUR INSURANCE

What insurance company do you use for your vehicle and home insurance?	Agent's Name, Address and Phone Number:

TELL US ABOUT YOUR FINANCIAL CONDITION

ASSETS (Items I Own)	Market Value	Liabilities (Items I Owe)	Payment	# of Mos.	Amount Owed
Cash On Hand		**Notes Payable to Banks**			
Deposits With Lender					
Other Banks or Credit Unions		**Notes & Loans Payable to Others**			
Stocks & Bonds Marketable Securities		**Bank Credit Cards**			
Others		**Other Revolving Accounts**			
Vehicles (Make and Model)		**Vehicles** Financed By			
Real Estate Residence		**Real Estate** Residence			
Unimproved Land		Unimproved Land			
Income Property(ies)		Income Property(ies)			

Other Assets Retirement Accounts		**Other Liabilities** (Describe)			
Value of Business Owned					
Other Assets and Personal Property					

Total Assets	**$**	**Total Liabilities**	**$**

Have you ever signed for anyone?

As a Co-signer on Notes or Contracts:	As a Guarantor on Notes and Contracts:	Other (Describe):
☐ Yes ☐ No $	☐ Yes ☐ No $	☐ Yes ☐ No $

For Whom:

Tell us about your other expenses

Insurance Premiums:	Real Estate Taxes:	Other Taxes:
☐ Month	☐ Month	☐ Month
☐ Annual	☐ Annual	☐ Annual
☐ Other	☐ Other	☐ Other

SIGNATURE

I (we) hereby affirm that the information contained in this application, including the information on the reverse side, is true, complete and correct and that the Lender is relying on this information if it makes the requested loan. Lender is authorized to make any investigation of my/our credit and/or employment status either directly or through any agency employed by Lender. Lender may disclose to any other interested parties Lender's experience with my/our account. Lender may keep this application even if it decides not to make the loan to me/us. The undersigned also acknowledges receipt of a copy of this application and the Notice of Right to Request Specific Reason(s) for Credit Denial.

Applicant's Signature Title Date

Co-applicant's Signature (Where Applicable) Title Date

EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract): because all or part of the applicant's income derives from any public assistance program: or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with law concerning this creditor is:

FDIC Consumer Response Center
1100 Walnut St., Box #11
Kansas City, MO 64106

LEGACY BANK
Member FDIC

Preliminary Credit Disclosure

IMPORTANT.
Do not sign this form until you carefully read it and understand its contents.

Purpose

You have submitted an application for a loan and you may be purchasing an insurance product or annuity from Legacy Bank in connection with your loan. Federal law requires Legacy Bank to provide you with the following disclosures.

Disclosures

Legacy Bank may not condition an extension of credit on either:

1. The consumer's purchase of an insurance product or annuity from the bank or any of its affiliates; or
2. The consumer's agreement not to obtain, or a prohibition on the consumer from obtaining, an insurance product or annuity from an unaffiliated entity.

Acknowledgement

By signing below, I acknowledge that I have read, received, and understand this insurance disclosure. By Signing Below, I acknowledge that an oral disclosure has been made in addition to this written disclosure.

Applicant	Date
Applicant	Date

LEGACY BANK
Member FDIC

Preliminary Credit Disclosure

IMPORTANT.
Do not sign this form until you carefully read it and understand its contents.

Purpose

You have submitted an application for a loan and you may be purchasing an insurance product or annuity from Legacy Bank in connection with your loan. Federal law requires Legacy Bank to provide you with the following disclosures.

Disclosures

Legacy Bank may not condition an extension of credit on either:

1. The consumer's purchase of an insurance product or annuity from the bank or any of its affiliates; or
2. The consumer's agreement not to obtain, or a prohibition on the consumer from obtaining, an insurance product or annuity from an unaffiliated entity.

Acknowledgement

By signing below, I acknowledge that I have read, received, and understand this insurance disclosure. By Signing Below, I acknowledge that an oral disclosure has been made in addition to this written disclosure.

Applicant	Date
Applicant	Date

CUSTOMER COPY

FACTS

WHAT DOES LEGACY BANK DO WITH YOUR PERSONAL INFORMATION?

Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and income
- account balances and payment history
- credit history and credit scores

When you are *no longer* our customer, we continue to share your information as described in this notice.

How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Legacy Bank chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Legacy Bank share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	**Yes**	**No**
For our marketing purposes— to offer our products and services to you	**Yes**	**No**
For joint marketing with other financial companies	**No**	**We don't share.**
For our affiliates' everyday business purposes— information about your transactions and experiences	**Yes**	**No**
For our affiliates' everyday business purposes— information about your creditworthiness	**No**	**We don't share.**
For our affiliates to market to you	**No**	**We don't share.**
For nonaffiliates to market to you	**No**	**We don't share.**

Questions?

Call 1-800-687-9688 or go to www.legacybank.com

LEGACY BANK®
Member FDIC

What we do	
How does Legacy Bank protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings. Access to personal information is limited to those who need it for legitimate business purposes. Security practices and procedures are in place to ensure the confidentiality of the information.
How does Legacy Bank collect my personal information?	We collect your personal information, for example, when you ■ open an account or deposit money ■ pay your bills or apply for a loan ■ use your debit card We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.
Why can't I limit all sharing?	Federal law gives you the right to limit only ■ sharing for affiliates' everyday business purposes—information about your creditworthiness ■ affiliates from using your information to market to you ■ sharing for nonaffiliates to market to you State laws and individual companies may give you additional rights to limit sharing.

Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. ■ *Our affiliates include Legacy Insurance and Legacy Financial.*
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. ■ *Legacy Bank does not share with nonaffiliated third parties so they can market to you.*
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. ■ *Legacy Bank has a joint marketing agreement with Bankers Bank of Kansas. Legacy Bank does not share your personal information for joint marketing.*

LEGACY BANK
Member FDIC