



\*\*\*Referred By CRN Construction LLC\*\*\*

## HOME IMPROVEMENT LOAN APPLICATION

<b>TYPE OF APPLICATION:</b>		<b>AMOUNT OF REQUEST:</b> \$ _____	
<input type="checkbox"/> Application for <b>INDIVIDUAL CREDIT</b>	Preferred Payment Date: _____ Automatic Payment <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Application for <b>JOINT CREDIT</b> with _____ NAME OF CO-APPLICANT OR CO-SIGNER	from Banner Bank Acct. # _____		
If you live in California, Idaho or Washington, or this is a joint application, check one of the following:			
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried			
Do you have a first mortgage on your home ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Do you have a checking / savings account? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Purpose of Loan (How will you spend the proceeds):</b>			

<b>INFORMATION REGARDING APPLICANT</b> (At least one applicant must reside in WA, OR, ID, or CA)			
FIRST NAME	MIDDLE INITIAL	LAST	SOCIAL SECURITY NUMBER
STREET ADDRESS		HOW LONG? YRS. MOS.	HOME PHONE
CITY	STATE	ZIP CODE	DATE OF BIRTH <small>must be 18 years or older to apply</small>
PRESENT EMPLOYER	OCCUPATION	BUSINESS PHONE & EXT.	<input type="checkbox"/> RENT Monthly Payment: \$ <input type="checkbox"/> OWN
EMPLOYER ADDRESS, CITY, STATE, ZIP			DATE OF EMP.
GROSS MONTHLY INCOME			
<b>OTHER INCOME: Alimony, child support or separate maintenance income need not be revealed unless you wish to use it as a basis for repaying this obligation.</b>		SOURCE:	AMOUNT: \$
EMAIL ADDRESS:			

<b>INFORMATION REGARDING CO-APPLICANT</b> (At least one applicant must reside in WA, OR, ID, or CA)			
FIRST NAME	MIDDLE INITIAL	LAST	SOCIAL SECURITY NUMBER
STREET ADDRESS		HOW LONG? YRS. MOS.	HOME PHONE
CITY	STATE	ZIP CODE	DATE OF BIRTH <small>must be 18 years or older to apply</small>
PRESENT EMPLOYER	OCCUPATION	BUSINESS PHONE & EXT.	<input type="checkbox"/> RENT Monthly Payment: \$ <input type="checkbox"/> OWN
EMPLOYER ADDRESS, CITY, STATE, ZIP			DATE OF EMP.
GROSS MONTHLY INCOME			
<b>OTHER INCOME: Alimony, child support or separate maintenance income need not be revealed unless you wish to use it as a basis for repaying this obligation.</b>		SOURCE:	AMOUNT: \$
EMAIL ADDRESS:			

By providing a telephone number, you agree that we have your express consent to contact you at the number provided about any of your Banner Bank accounts, and that we may use text messaging, artificial or prerecorded voice messages and automatic dialing technology to call you for any non-telemarketing purpose, including but not limited to informational, account servicing, and collection calls. Message and data rates may apply. You authorize your wireless carrier to use or disclose information about your account and your wireless device, if available, to Banner, its affiliates, or its service provider for the duration of your relationship, solely to help them identify you or your wireless device and to prevent fraud. See our Privacy Policy for how we treat your data. You also agree that by providing your email address, we have your permission to contact you through your email address to notify you of progress on your application, provide important account information, or to let you know about other products and services.

By submitting this application for credit, I/we certify that the information presented here, including any provided tax returns or separate financial statements is accurate and complete. I/we understand that Banner Bank will rely on this information in order to assess my/our credit application. I/we authorize Banner Bank to request any information that is deemed necessary to assess this application or to service my/our credit file in the future. I/we authorize any third party to release information (including but not limited to verification of income and employment, credit history, loan or credit balance, account balance, tax returns, or any other information) to Banner Bank at their request, now or in the future.

<b>TO BE COMPLETED BY INTERVIEWER:</b>	Interviewer's Name (Print or Type)	
This application was taken by:	Interviewer's Signature	Date
	Interviewer's Phone Number (include area code)	
	<input type="checkbox"/> Face to face interview	
<input type="checkbox"/> Mail		
<input type="checkbox"/> Telephone		
<input type="checkbox"/> Internet		