

You may apply for a credit extension or financial accommodation individually or jointly with a co-applicant. This statement and any applicable supporting schedules may be completed jointly by both married and unmarried co-applicants if their assets and liabilities are sufficiently joined so that the statement can be meaningfully and fairly presented on a combined basis; otherwise separate statements and schedules are required.

Introductory Information\*

DOCUMENT DATE
<div>(Check One)</div> <div> <input type="radio"/> I (we) do not intend to apply for joint credit.             <input type="radio"/> I (we) intend to apply for joint credit. Initials ____ Initials ____           </div> <div> <input type="radio"/> This statement is provided in support of personal guarantee(s) or as an update for the review of an existing relationship.           </div> <div> <input type="radio"/> I (we) have provided our own financial statement. (If so, please complete areas noted with * only.)           </div>

Primary Applicant Information\*

FIRST NAME	MIDDLE INITIAL	LAST NAME	DATE OF BIRTH
SOCIAL SECURITY NUMBER		EMAIL ADDRESS	
MAILING ADDRESS (include street, city, state, zip)			YEARS OF RESIDENCY
CELL PHONE	WORK PHONE	HOME PHONE	
DRIVERS LICENSE NUMBER		STATE ISSUED	EXPIRATION DATE
EMPLOYER	YEARS SERVED	OCCUPATION	
CITIZENSHIP (select one) <input type="radio"/> U.S. CITIZEN <input type="radio"/> RESIDENT ALIEN <input type="radio"/> NON-RESIDENT ALIEN			
What is the name and phone number of your nearest relative not living with you?			
What is the name and phone number of your attorney?			
What is the name and phone number of your accountant?			

Co-Applicant Information\*

FIRST NAME	MIDDLE INITIAL	LAST NAME	DATE OF BIRTH
SOCIAL SECURITY NUMBER		EMAIL ADDRESS	
MAILING ADDRESS (include street, city, state, zip)			YEARS OF RESIDENCY
CELL PHONE	WORK PHONE	HOME PHONE	
DRIVERS LICENSE NUMBER		STATE ISSUED	EXPIRATION DATE
EMPLOYER	YEARS SERVED	OCCUPATION	
CITIZENSHIP (select one) <input type="radio"/> U.S. CITIZEN <input type="radio"/> RESIDENT ALIEN <input type="radio"/> NON-RESIDENT ALIEN			
What is the name and phone number of your nearest relative not living with you?			
What is the name and phone number of your attorney?			
What is the name and phone number of your accountant?			

ANNUAL INCOME	APPLICANT	CO-APPLICANT	ANNUAL EXPENDITURES	AMOUNT
Salary	\$	\$	Federal Income and Other Taxes	\$
Bonuses & Commissions	\$	\$	State Income and Other Taxes	\$
Rental Income	\$	\$	Rental Payment, Co-op or Condo Maintenance	\$
Interest Income	\$	\$	Mortgage Payments (personal)	\$
Dividend Income	\$	\$	Mortgage Payments (investment)	\$
Capital Gains	\$	\$	Principal and Interest on Loans	\$
Partnership Income	\$	\$	Insurance Premiums (Auto/Home/Life/Disability/Other)	\$
Other Investment Income	\$	\$	Alimony/Child Support	\$
Other Income (please list)**	\$	\$	Tuition	\$
	\$	\$	Other Living Expenses	\$
	\$	\$	Medical Expenses	\$
	\$	\$	Other Expenses (please list)	\$
	\$	\$		\$
	\$	\$		\$
INCOME TOTALS	\$	\$		\$
TOTAL INCOME	\$		TOTAL EXPENDITURES	\$

## Schedule 1- Cash, Savings, Certificates of Deposit & Money Market Accounts

FINANCIAL INSTITUTION	TYPE OF ACCOUNT	NAME REGISTERED ON ACCOUNT	PLEDGED?	BALANCE
1	<input type="radio"/> CHECKING <input type="radio"/> SAVINGS <input type="radio"/> CD <input type="radio"/> MONEY MKT		<input type="radio"/> YES <input type="radio"/> NO	\$
2	<input type="radio"/> CHECKING <input type="radio"/> SAVINGS <input type="radio"/> CD <input type="radio"/> MONEY MKT		<input type="radio"/> YES <input type="radio"/> NO	\$
3	<input type="radio"/> CHECKING <input type="radio"/> SAVINGS <input type="radio"/> CD <input type="radio"/> MONEY MKT		<input type="radio"/> YES <input type="radio"/> NO	\$
4	<input type="radio"/> CHECKING <input type="radio"/> SAVINGS <input type="radio"/> CD <input type="radio"/> MONEY MKT		<input type="radio"/> YES <input type="radio"/> NO	\$
5	<input type="radio"/> CHECKING <input type="radio"/> SAVINGS <input type="radio"/> CD <input type="radio"/> MONEY MKT		<input type="radio"/> YES <input type="radio"/> NO	\$
6	<input type="radio"/> CHECKING <input type="radio"/> SAVINGS <input type="radio"/> CD <input type="radio"/> MONEY MKT		<input type="radio"/> YES <input type="radio"/> NO	\$
SCHEDULE 1 TOTAL				\$

NO. OF SHARES	DESCRIPTION	PLEGGED?	NAME ON ACCOUNT	COST	EXCHANGE	MARKET VALUE
	1	<input type="radio"/> YES <input type="radio"/> NO		\$	<input type="radio"/> LISTED <input type="radio"/> UNLISTED	\$
	2	<input type="radio"/> YES <input type="radio"/> NO		\$	<input type="radio"/> LISTED <input type="radio"/> UNLISTED	\$
	3	<input type="radio"/> YES <input type="radio"/> NO		\$	<input type="radio"/> LISTED <input type="radio"/> UNLISTED	\$
	4	<input type="radio"/> YES <input type="radio"/> NO		\$	<input type="radio"/> LISTED <input type="radio"/> UNLISTED	\$
SCHEDULE 2 TOTAL						\$

Schedule 3 - Life Insurance

INSURANCE COMPANY	INSURED	BENEFICIARY	FACE VALUE <sup>1</sup>	CASH VALUE <sup>2</sup>	LOANS
1			\$	\$	\$
2			\$	\$	\$
3			\$	\$	\$
4			\$	\$	\$
<sup>1</sup> The amount of accumulated funds as of today. <sup>2</sup> The amount of insurance proceeds the policy pays to your beneficiaries upon your death.				SCHEDULE 3 TOTALS	\$
					\$

Schedule 4 - Receivables, Mortgages, and/or Contracts Owned

NAME OF DEBTOR	DESCRIPTION OF PROPERTY	LIEN POSITION	DATE OF MATURITY	REPAYMENT TERMS (AMOUNT OWED)	BALANCE
1		<input type="radio"/> 1 <sup>ST</sup> <input type="radio"/> 2 <sup>ND</sup> <input type="radio"/> 3 <sup>RD</sup>		\$ <input type="radio"/> BI-WEEKLY <input type="radio"/> MONTHLY <input type="radio"/> QUARTERLY <input type="radio"/> ANNUALLY	\$
2		<input type="radio"/> 1 <sup>ST</sup> <input type="radio"/> 2 <sup>ND</sup> <input type="radio"/> 3 <sup>RD</sup>		\$ <input type="radio"/> BI-WEEKLY <input type="radio"/> MONTHLY <input type="radio"/> QUARTERLY <input type="radio"/> ANNUALLY	\$
3		<input type="radio"/> 1 <sup>ST</sup> <input type="radio"/> 2 <sup>ND</sup> <input type="radio"/> 3 <sup>RD</sup>		\$ <input type="radio"/> BI-WEEKLY <input type="radio"/> MONTHLY <input type="radio"/> QUARTERLY <input type="radio"/> ANNUALLY	\$
4		<input type="radio"/> 1 <sup>ST</sup> <input type="radio"/> 2 <sup>ND</sup> <input type="radio"/> 3 <sup>RD</sup>		\$ <input type="radio"/> BI-WEEKLY <input type="radio"/> MONTHLY <input type="radio"/> QUARTERLY <input type="radio"/> ANNUALLY	\$
SCHEDULE 4 TOTAL					\$

Schedule 5 - Real Estate Owned (attach mortgage statement)

ADDRESS OF PROPERTY OWNED PERSONALLY	LEGAL OWNER	YEAR OF PURCHASE	PURCHASE PRICE	LENDER NAME	INTEREST RATE	MATURITY DATE	MONTHLY PAYMENT	LOAN BALANCE	MARKET VALUE
1			\$				\$	\$	\$
2			\$				\$	\$	\$
3			\$				\$	\$	\$
SCHEDULE 5 PERSONALLY OWNED PROPERTY VALUE TOTALS								\$	\$

ADDRESS OF PROPERTY OWNED IN PARTNERSHIP/LLC	OWNERSHIP PERCENTAGE	LEGAL OWNER	YEAR OF PURCHASE	PURCHASE PRICE	LENDER NAME	INTEREST RATE	MATURITY DATE	MONTHLY PAYMENT	LOAN BALANCE	MARKET VALUE
1				\$				\$	\$	\$
2				\$				\$	\$	\$
3				\$				\$	\$	\$
SCHEDULE 5 JOINT/INVESTMENT OWNED PROPERTY VALUE TOTALS									\$	\$

Schedule 6 - Profit Sharing, Pension, and Retirement Accounts

INSTITUTION OR PLAN	TYPE OF ACCOUNT	LOAN	AMOUNT VESTED	BALANCE
1	<input type="radio"/> IRA <input type="radio"/> ROTH IRA <input type="radio"/> SEP <input type="radio"/> 401K <input type="radio"/> PENSION <input type="radio"/> UNION <input type="radio"/> TEACHERS	\$	\$	\$
2	<input type="radio"/> IRA <input type="radio"/> ROTH IRA <input type="radio"/> SEP <input type="radio"/> 401K <input type="radio"/> PENSION <input type="radio"/> UNION <input type="radio"/> TEACHERS	\$	\$	\$
3	<input type="radio"/> IRA <input type="radio"/> ROTH IRA <input type="radio"/> SEP <input type="radio"/> 401K <input type="radio"/> PENSION <input type="radio"/> UNION <input type="radio"/> TEACHERS	\$	\$	\$
4	<input type="radio"/> IRA <input type="radio"/> ROTH IRA <input type="radio"/> SEP <input type="radio"/> 401K <input type="radio"/> PENSION <input type="radio"/> UNION <input type="radio"/> TEACHERS	\$	\$	\$
SCHEDULE 6 TOTALS			\$	\$

Schedule 7 - Business Interests

DESCRIPTION (Include Ownership Percentage and Valuation Method)	BALANCE
1	\$
2	\$
3	\$
SCHEDULE 7 TOTAL	\$

Schedule 8 - Other Assets (include autos, personal property)

DESCRIPTION (Include Ownership Percentage and Valuation Method)	BALANCE
1	\$
2	\$
3	\$
SCHEDULE 8 TOTAL	\$

Schedule 9 - Loans Payable to Financial Institutions and Others

TO WHOM LOAN IS PAYABLE	ADDRESS	INTEREST RATE	DESCRIBE COLLATERAL OR INDICATE IF UNSECURED	REPAYMENT TERMS	MATURITY DATE	AVAILABLE CREDIT	UNPAID BALANCE
1				\$ per		\$	\$
2				\$ per		\$	\$
3				\$ per		\$	\$
4				\$ per		\$	\$
SCHEDULE 9 TOTAL							\$

Schedule 10 - Credit Cards

TO WHOM PAYABLE	INTEREST RATE	PAY IN FULL MONTHLY	MONTHLY PAYMENT	AVAILABLE CREDIT	CURRENT BALANCE
1		<input type="radio"/> YES <input type="radio"/> NO	\$	\$	\$
2		<input type="radio"/> YES <input type="radio"/> NO	\$	\$	\$
3		<input type="radio"/> YES <input type="radio"/> NO	\$	\$	\$
4		<input type="radio"/> YES <input type="radio"/> NO	\$	\$	\$
SCHEDULE 10 TOTAL					\$

Schedule 11 - Federal & State Taxes and Other Liabilities

DESCRIPTION (Include Ownership Percentage and Valuation Method)	BALANCE
1	\$
2	\$
3	\$
SCHEDULE 11 TOTAL	\$

Schedule 12 - Contingent Liabilities

LIABILITY DESCRIPTION	APPLICANT	CO-APPLICANT	TO WHOM LIABILITY IS PAYABLE	INTEREST RATE	MATURITY DATE	MAXIMUM LIABILITY
Are you a co-maker, endorser or guarantor on any debts, leases or other obligations? If so, indicate to whom you have signed on behalf.						
	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO				\$
	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO				\$
Do you have any unsecured lines of credit (drawn or undrawn) that have not been disclosed previously?						
	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO				\$
	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO				\$
SCHEDULE 12 MAXIMUM LIABILITY TOTAL						\$

APPLICANT	CO-APPLICANT	DETAILS	BALANCE
Do you have outstanding Letters of Credit or Surety Bonds? (if yes, include details)			
<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO	DETAILS	\$
Are there any suits or legal actions pending against you? (if yes, include details)			
<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO	DETAILS	\$
Are any of your tax obligations past due? (if yes, include details)			
<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO	DETAILS	\$
SCHEDULE 12 ADDITIONAL LIABILITIES TOTAL			\$

TAX LIABILITY INFORMATION	
Income tax returns are filed through:	DATE
Are any tax returns currently being contested?	<input type="radio"/> YES <input type="radio"/> NO
If yes, which tax return years currently being contested?	

Additional Information\*

LIABILITY DESCRIPTION	APPLICANT	CO-APPLICANT
Are you in the U.S. Armed Forces?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Have you or any firm in which you were a major owner ever declared bankruptcy?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Have you or any firm in which you were a major owner ever had a judgement against you?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Are any assets pledged or debts secured except as shown?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Are there any State or Federal Tax liens filed against you or any of your property?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Have you ever declared bankruptcy or defaulted on any debts?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Are you currently party to any lawsuits?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Do you have a will?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Have you ever had a financial plan prepared for you?	<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
Number of Dependents		
Marital Status <sup>†</sup>	<input type="radio"/> UNMARRIED <input type="radio"/> MARRIED <input type="radio"/> SEPARATED	<input type="radio"/> UNMARRIED <input type="radio"/> MARRIED <input type="radio"/> SEPARATED

<sup>†</sup> Answer only if this financial statement is provided in connection with a request for secured credit or applicant is seeking a joint account with spouse.

Information Summary

PRIMARY APPLICANT		
FIRST NAME	MIDDLE INITIAL	LAST NAME
SOCIAL SECURITY NUMBER		DATE OF BIRTH

CO-APPLICANT (IF ANY)		
FIRST NAME	MIDDLE INITIAL	LAST NAME
SOCIAL SECURITY NUMBER		DATE OF BIRTH

ASSETS	AMOUNT	LIABILITIES	AMOUNT
Cash (Schedule 1)	\$	Insurance Loans (Schedule 3)	\$
Securities (Schedule 2)	\$	Mortgages on Real Estate Owned Personally (Schedule 5)	\$
Life Insurance Cash Value (Schedule 3)	\$	Mortgages on Investment Real Estate Owned (Schedule 5)	\$
Mortgages and Contracts Owned (Schedule 4)	\$	Loans Against Retirement Accounts (Schedule 6)	\$
Real Estate Owned Personally (Schedule 5)	\$	Loans Payable (Schedule 9)	\$
Investment Real Estate Owned (Schedule 5)	\$	Credit Cards (Schedule 10)	\$
Profit Sharing, Pension & IRA Accounts (Schedule 6)	\$	Federal & State Taxes Payable & Other Liabilities(Schedule 11)	\$
Business Interests (Schedule 7)	\$		
Other Assets (Schedule 8)	\$		
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$
NET WORTH			\$
CONTINGENT LIABILITIES (SCHEDULE 12)			\$

TOTAL INCOME	\$	TOTAL EXPENDITURES	\$
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Representations and Warranties\*

By signing below, the parties acknowledge and agree to each of the following:

- All information in this application and in the financial statements are true and complete to the best of your knowledge and belief.
- That neither applicant has made any misrepresentation in this application or has failed to include important information.
- Platinum Bank has the right to verify the accuracy of the information provided.
- Platinum Bank is authorized to obtain a Consumer Credit Report and/or check the credit rating and history of the applicant(s).
- All supporting documentation included in this application remains the property of Platinum Bank.
- All information provided will be kept confidential by Platinum Bank and will be used only for the purposes of considering this loan request.
- In the event that Platinum Bank grants credit, we reserve the right to release information concerning our credit experience with the applicant.
- I understand, acknowledge, and agree that my tax return information may be provided to and used by the Lender to evaluate credit risks in a loan made to me or guaranteed by me. Therefore, I consent to the Lender using my tax return information to underwrite the loan application and service the loan per the terms of the loan documents. I also understand that the Lender may elect to sell all or a portion of the loan to another lender. I consent to the sharing of my tax return information with potential buyers of the loan (or portion thereof) for the purpose of evaluating the loan purchase and the servicing of the loan per the loan documents.

SIGNATURE OF PRIMARY APPLICANT

DATE

SIGNATURE OF CO-APPLICANT

DATE