Revised: March 2023 Platinum Bank NMLS #673646



Personal Loan Application

Personal Information				
Are you applying jointly for this I	oan? 📙 Yes 📙 N	lo Initials		
Full Name of Applicant #1:				
Social Security Number:		Date of Birth:		
Physical Address:				
City:	State:		Zip Code:	
Mailing Address (if difference from abo	T .		T	
City:	State:		Zip Code:	
Previous Address (if at current address			F.	
Home Phone:	Cell Phone:		Fax:	
E-Mail Address:				
Driver's License or State ID #:				
State Issued:	Date Issued:		Expiration Date:	
Occupation (please be specific):				
Employer's Name:	Title:			
Address:	City:		Zip Code:	
Phone Number:	Years There:			
Name of nearest relative not living	with you:			
Address:		Phone Number:		
Check appropriate box: I am an	American Citizen	a Resident Alien	a Non – Resident Alien	
Are you currently or have you been				
Do you have an immediate family n	nember or close ass	sociate who is a cu	rrent or former Senior Foreign	
Political Figure? Yes No				
7.1.1.4				
Joint Account Information (if Ap Are you applying jointly for this		No Initials		
Joint Account Information (if Ap Are you applying jointly for this Full Name of Applicant #1:		No Initials_		
Are you applying jointly for this Full Name of Applicant #1:		No Initials		
Are you applying jointly for this				
Are you applying jointly for this Full Name of Applicant #1: Social Security Number:			Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address:	State:		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City:	State:		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address	State: ve): State:		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City:	State: ve): State:			
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address	State: ve): State: less than 2 years):		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address Home Phone:	State: ve): State: less than 2 years):		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address Home Phone: E-Mail Address:	State: ve): State: less than 2 years):		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #:	State: ve): State: state: cless than 2 years): Cell Phone:		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued:	State: ve): State: state: cless than 2 years): Cell Phone:		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued: Occupation (please be specific):	State: ve): State: s less than 2 years): Cell Phone: Date Issued:		Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued: Occupation (please be specific): Employer's Name:	State: ve): State: sless than 2 years): Cell Phone: Date Issued: Title:		Zip Code: Fax: Expiration Date:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from aborecity: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued: Occupation (please be specific): Employer's Name: Address: Phone Number:	State: ve): State: sless than 2 years): Cell Phone: Date Issued: Title: City: Years There:		Zip Code: Fax: Expiration Date:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from abo City: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued: Occupation (please be specific): Employer's Name: Address:	State: ve): State: sless than 2 years): Cell Phone: Date Issued: Title: City: Years There:		Zip Code: Fax: Expiration Date:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from about ity: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued: Occupation (please be specific): Employer's Name: Address: Phone Number: Name of nearest relative not living Address:	State: ve): State: ve): State: sless than 2 years): Cell Phone: Date Issued: Title: City: Years There: with you:	Date of Birth: Phone Number:	Zip Code: Expiration Date: Zip Code:	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from about ity: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued: Occupation (please be specific): Employer's Name: Address: Phone Number: Name of nearest relative not living Address: Check appropriate box: I am an	State: ve): State: sless than 2 years): Cell Phone: Date Issued: Title: City: Years There: with you: American Citizen	Date of Birth: Phone Number: a Resident Alien	Zip Code: Expiration Date: Zip Code: a Non – Resident Alien	
Are you applying jointly for this Full Name of Applicant #1: Social Security Number: Physical Address: City: Mailing Address (if difference from about ity: Previous Address (if at current address Home Phone: E-Mail Address: Driver's License or State ID #: State Issued: Occupation (please be specific): Employer's Name: Address: Phone Number: Name of nearest relative not living Address:	State: ve): State: sless than 2 years): Cell Phone: Date Issued: Title: City: Years There: with you: American Citizen a Senior Foreign Poreign	Phone Number: a Resident Alien olitical Figure?	Zip Code: Fax: Expiration Date: Zip Code: a Non – Resident Alien Yes No	

Please Answer the Following Questions for all Applicants				
			Applicant #1	Applicant #2
Have you had a checking If yes, where?	account in the last 12 Mor	nths?	Yes No	Yes No
	king account closed without your		☐ Yes ☐ No	☐ Yes ☐ No
	of a criminal offense invol	ving	☐ Yes ☐ No	☐ Yes ☐ No
	ederal Tax Liens filed again	st you	☐ Yes ☐ No	☐ Yes ☐ No
	pankruptcy or defaulted on	any	☐ Yes ☐ No	☐ Yes ☐ No
	D	D -		<u>'</u>
Two of Law Dawnstade	Personal Lo		-	
Type of Loan Requested:		HELO		
Amount Requested of Ba		Cash	Contribution on you	г вепаіт:
Purpose/ Reason for Req Gross Monthly Income:	uest:			
Source of Other Income wish to have it considered as a	(alimony, child support or separa basis for repaying this obligation	e mainte	nance income need not t	to be revealed if you do not
Other Income:		Dooise	d Tourne	
Maximum Monthly Payme Proposed Collateral:	enc:	Desire	ed Term:	
Appraised Value (if Known)		Dato	Appraised:	
Insurance Company:	<u>. </u>	Date F	чры аізец.	
Agent's Name & Contact	Information:			
Are you party to any laws		s Pleas	se explain) :	
	•	3, 1 icus	c explain) .	
•	Attorney Name & Contact Information: Applicant Marital Status (do not complete if this is an Co-Applicant Marital Status (do not complete if this is			
application for individual unsecured credit unless you reside in a Community Property State): a Community Property State):				ecured credit unless you reside
Married		Пм	arried	
Separated Separated				
Unmarried (single, di	vorced, widowed)	=	nmarried (single, div	vorced, widowed)
	· ,		· •	· ,
Personal Assets / Debts				
Assets:	Value:	Debts	:	Monthly Payment:
Other Obligations (Child Si	upport, alimony, separate mainter	nance, tui	tion, etc.):	
If applying for credit j completely as possible	ointly, it is a requireme e. If a party, who is not d that person's name; h	nt that an app	all parties have d licant, is required	l to sign to grant

Other Information (Please Describe)		

Thank you for considering Platinum Bank for your financing needs

BY SIGNING BELOW, YOU ACKNOWLEDGE AND AGREE TO EACH OF THE FOLLOWING

- 1. All information in this application and in the financial statements are true and complete to the best of your knowledge and belief.
- 2. That neither applicant has made any misrepresentation in this application or has failed to include important information.
- 3. Platinum Bank has the right to verify the accuracy of the information provided.
- 4. Platinum Bank is authorized to obtain a consumer credit report/ check the credit rating and history of all the applicant(s).
- 5. That all supporting documentation included in the application remains the property of Platinum Bank
- 6. That all information provided will be kept confidential by Platinum Bank and will be used only for the purposes of considering this loan request.
- 7. In the event we grant credit, Platinum Bank reserves the right to release information concerning our credit experience with the applicant.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license and other identifying documents.

Applicant #1	
Name:	Date:
Signature:	
Applicant #2	
Name:	Date:
Signature:	



Stop Here! Only complete the section below if the loan is for:

- Home Improvement
- Home Purchase
- Refinance where both existing & new loan are secured by lien on dwelling.

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (e.g. ethnicity, race and sex) in order to monitor our compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more "Hispanic or Latino" origins and one or more designations for "race". The law provides that we may not discriminate on the basis of this information or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race and sex on the basis of visual observation and surname. If you do not wish to provide some or all of this information, please check below. **Check one or more that apply.**

APPLICANT	CO-APPLICANT		
ETHNICITY	ETHNICITY		
 ☐ Hispanic or Latino ☐ Mexican ☐ Puerto Rican ☐ Cuban ☐ Other Hispanic or Latino Print origin below (e.g. Argentinian, Columbian, Dominican, Nicaraguan, Salvadoran, etc.) 	 ☐ Hispanic or Latino ☐ Mexican ☐ Puerto Rican ☐ Cuban ☐ Other Hispanic or Latino Print origin below (e.g. Argentinian, Columbian, Dominican, Nicaraguan, Salvadoran, etc.) 		
□ Not Hispanic or Latino	□ Not Hispanic or Latino		
$\hfill \square$ I do not wish to provide this information.	$\hfill \square$ I do not wish to provide this information.		
RACE	RACE		
☐ American Indian or Alaska Native Print name of enrolled or principal tribe.	☐ American Indian or Alaska Native Print name of enrolled or principal tribe.		
☐ Asian	□ Asian		
☐ Asian Indian	☐ Asian Indian		
□ Chinese	☐ Chinese		
☐ Filipino	☐ Filipino		
☐ Japanese	☐ Japanese		
☐ Korean	☐ Korean		
☐ Vietnamese	☐ Vietnamese		
☐ Other Asian	☐ Other Asian		
Print Race (e.g. Hmong, Laotian, Thai, Pakistani, Cambodian, etc.)	Print Race (e.g. Hmong, Laotian, Thai, Pakistani, Cambodian, etc.)		
□ Black or African American	□ Black or African American		

APPLICANT	CO-APPLI	CANT	
 □ Native Hawaiian or Other Pacific Islander □ Native Hawaiian □ Guamanian or Chamorro □ Samoan □ Other Pacific Islander Print Race (e.g. Fijian, Tongon, etc.) 	 Native Hawaiian or Other Pacific Islander □ Native Hawaiian □ Guamanian or Chamorro □ Samoan □ Other Pacific Islander Print Race (e.g. Fijian, Tongon, etc.) 		
 □ White □ I do not wish to provide this information. 	☐ White☐ I do not wish to provide this information.		
SEX	SEX		
 □ Female □ Male □ I do not wish to provide this information. 	□ Male		
To Be Completed by Financial Institution (for an ap	plication taken in person):		
		YES	NO
Was the ethnicity of the APPLICANT collected on the basis of visual observation or surname?			
Was the ethnicity of the CO-APPLICANT collected on the basis of visual observation or surname?			
Was the race of the APPLICANT collected on the basis of visual observation or surname?			
Was the race of the CO-APPLICANT collected on the basis of visual observation or surname?			
Was the sex of the APPLICANT collected on the basis of visual observation or surname?			
Was the sex of the CO-APPLICANT collected on the basis of visual observation or surname?			
This Section is to be completed by Interviewer Only:			
This application was taken by: Face-to-Face Mail	Telephone Internet		
Interviewer's Name (Print or Type):			
Interviewer's Signature:	Date:		
Interviewer's Phone Number (Include area code):			
Name and Address of Interviewer's Employer:			



The Secure and Fair Enforcement for Mortgage Licensing Act (S.A.F.E. Act) was enacted as part of the Housing and Economic Recovery Act of 2008. This Act requires an employee of our bank who acts as a residential mortgage loan originator (MLO) to register with the Nationwide Mortgage Licensing System and Registry (NMLS), obtain a unique identifier, and to maintain this registration. Further, Platinum Bank has adopted a written policy and procedures designed to assure compliance with these requirements and require all mortgage loan originators to follow these policies and procedures.

NMLS ID#

Platinum Bank - NMLS ID #673646

Mortgage Loan Originators with Platinum Bank

Kelly A Donohoe 1613308

By accessing www.nmlsconsumeraccess.org you will find specific profile information for each Mortgage Loan Originator (MLO). This information will include the MLO's publicly available registration information, any State mortgage licenses held (active or inactive), employment history, and any publicly settled disciplinary and enforcement actions.