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SHORT FORM CREDIT APPLICATION

(For Wisconsin residents only)

Date of Application _____

To Creditor: Shell Lake State Bank

1. **APPLICANT(S).** Check one of the following boxes. You may apply for individual credit in your name only, joint credit in your name and the name of your spouse or joint credit in your name and the name(s) of other joint applicant(s). Note: Individual credit and joint credit may also be marital purpose debt under Wisconsin law.

- ☐ Individual Credit. Complete Applicant Column and sign on page 2. Complete Spouse Column with information about your spouse only if you are married **and** a Wisconsin resident. Only the applicant signs on page 2.
- ☐ Joint Credit with spouse as joint applicant. Complete Applicant and Spouse Columns. Both joint applicant spouses sign on page 2.
- ☐ Joint Credit with _____ _____ as joint applicant who **is not** your spouse. Each joint applicant must complete a separate application as if applying for individual credit and submit them together, including completing Spouse Column if the joint applicant is married **and** a Wisconsin resident. Only the applicant signs on page 2.

2. **LOAN** ☐ Amount requested $ _____ Purpose _____

Collateral offered ☐ Yes ☐ No. If yes, describe collateral * _____

Owner(s) of collateral _____

Interest rate: _____ No. of Months: _____ Type: _____

APPLICANT INFORMATION

Applicant	Spouse
	☐ Joint-Applicant (Joint Credit) ☐ Non-Applicant
Applicant Name	Spouse Name
(For Wisconsin resident only) ☐ Married ☐ Unmarried ☐ Legally Separated	Dependents Other Than Self & Spouse No. / Ages
	Dependents (not listed by Applicant) No. / Ages
Social Security Number / Date of Birth / Driver's License (or ☐ State ID Card) No.	Social Security Number / Date of Birth / Driver's License (or ☐ State ID Card) No.
Driver's License (or ☐ State ID Card) Name / Expiration Date / State	Driver's License (or ☐ State ID Card) Name / Expiration Date / State
Changed Name on Driver's License or State ID Card in Past 5 Years ☐ No ☐ Yes, and give Prior Name _____	Changed Name on Driver's License or State ID Card in Past 5 Years ☐ No ☐ Yes, and give Prior Name _____
Home Phone / Cell Phone / E-Mail Address	Home Phone / Cell Phone / E-Mail Address
Present Address (Street, City, State & ZIP) ☐ Own ☐ Rent _____ No. Yrs.	Present Address (Street, City, State & ZIP) ☐ Own ☐ Rent _____ No. Yrs.
Previous Address (Street, City, State & ZIP) _____ No. Yrs.	Previous Address (Street, City, State & ZIP) _____ No. Yrs.

EMPLOYMENT INFORMATION

Name & Address of Employer ☐ Self Employed	Yrs. on this job / Gross Monthly Income $	Name & Address of Employer ☐ Self Employed	Yrs. on this job / Gross Monthly Income $
Position	Business Phone	Position	Business Phone
Name of Previous Employer ☐ Self Employed	Yrs. on this job	Name of Previous Employer ☐ Self Employed	Yrs. on this job

OTHER INCOME - Except alimony, child support and maintenance

(Need not reveal income from medical insurance, disability or wage continuation insurance if applicant(s) does not choose to have such income considered as a basis for repaying this obligation).

Gross Monthly Income	Applicant	Spouse	Total	Describe Other Income Source	Monthly Amount
Overtime	$	$	$	Applicant	$
Bonuses				Applicant	
Commissions				Spouse	
Dividends/Interest				Spouse	
Net Rental Income					
Other (complete section to the right to describe)					
Total (incl. base employment)	$	$	$		

INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE PAYMENTS

(Need not be revealed if applicant(s) does not choose to have it considered as a basis for repaying this obligation).

Kind of Income	Name of Payor		Kind of Income	Name of Payor	
Amount per Month	Ends	Amt. Past Due	Amount per Month	Ends	Amt. Past Due
$		$	$		$

Is any listed income likely to be reduced before the credit requested is paid off? No ☐ Yes ☐ (Explain in detail on separate sheet)	Is any listed income likely to be reduced before the credit requested is paid off? No ☐ Yes ☐ (Explain in detail on separate sheet)
Name and Address of nearest relative not living with you	Name and Address of nearest relative not living with you

Assets

Assets	Amount	Assets	Amount	Assets	Amount
Accounts in Banks	$	Real Estate Owned	$	Other Assets	$
Stocks & Bonds	$	Retirement Funds	$		
Life Insurance (Face Value) $	$	Automobiles	$	**Total Assets**	**$**

*This is not a complete or final description of collateral.

LIST ALL DEBTS AND OBLIGATIONS OF PERSONS IDENTIFIED IN APPLICANT AND SPOUSE COLUMNS.
(Use continuation sheet to list any additional liabilities.)

Liabilities and Pledged Assets. List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet if necessary. Indicate by (*) those liabilities which will be satisfied or paid in full upon the granting of the extension of credit to which this application relates.

LIABILITIES	Monthly Payment & Months Left to Pay	Unpaid Balance	Credit Limit	Debtor
Name and Address of Creditor Acct. no.	$ Payment/Months	$	$	☐ APPLICANT ☐ SPOUSE
Name and Address of Creditor Acct. no.	$ Payment/Months	$	$	☐ APPLICANT ☐ SPOUSE
Name and Address of Creditor Acct. no.	$ Payment/Months	$	$	☐ APPLICANT ☐ SPOUSE
Name and Address of Creditor Acct. no.	$ Payment/Months	$	$	☐ APPLICANT ☐ SPOUSE
Name and Address of Creditor Acct. no.	$ Payment/Months	$	$	☐ APPLICANT ☐ SPOUSE
Name and Address of Creditor Acct. no.	$ Payment/Months	$	$	☐ APPLICANT ☐ SPOUSE
Name and Address of Creditor Acct. no.	$ Payment/Months	$	$	☐ APPLICANT ☐ SPOUSE
Alimony/Child Support/Separate Maintenance Payments Owed to:	$	When Payments Due	Ends	Amt. Past Due $
TOTAL MONTHLY PAYMENTS ▶	**$**			

NOTICE TO MARRIED APPLICANTS: No provision of any marital property agreement, unilateral statement under s.766.59, Wis. Stats., or court decree under s.766.70, Wis. Stats., adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision.

NOTICE: We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

For the purpose of obtaining the credit described above, and any future credit granted to the undersigned by the creditor named above, the undersigned, jointly and severally, (1) represent that the above statements are true and complete, (2) authorize the creditor named above, or its agents, to verify them and obtain additional information concerning our credit, employment history or any other information, including credit reports (although the creditor may rely on these statements without any further verification), to furnish, to the extent not prohibited by applicable law, credit experience with me to others, and to answer any questions about our credit experience and other financial relationships with the creditor, and (3) agree to the provisions of any rules, regulations or agreements of the creditor governing such credit. This application is creditor's property.

The undersigned understand that it may be a crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OBTAINING CREDIT

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 obtains credit.

What this means for you: When you obtain credit, we will ask you 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 or other identifying documents.

Applicant Sign Here _____ Date _____

Joint-Applicant Spouse Sign Here _____ Date _____
(Joint Credit Only)

For married Wisconsin resident:

The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand the creditor may be required by law to give notice of this credit transaction to my spouse.

Applicant _____ Date _____

To be Completed by Interviewer:

Application received for Creditor by _____

This information was provided:

- ☐ In a face-to-face interview
- ☐ In a telephone interview
- ☐ By the applicant and submitted by fax or mail
- ☐ By the applicant and submitted via e-mail or the Internet

Loan Originator's Signature X		Date
Loan Originator's Name (print or type) John Rongner	Loan Originator NMLSR ID 306026	Loan Originator's Phone Number (including area code) 715-635-7858
Loan Originator Organization's Name Shell Lake State Bank	Loan Originator Organization NMLSR ID 405704	Loan Originator Organization's Address 219 N River St, PO Box 97, Spooner, WI 54801