



LOAN APPLICATION

JOINT
 INDIVIDUAL

MARRIED APPLICANTS MAY APPLY FOR EITHER SEPARATE OR JOINT CREDIT

Amount Requested \$

Purpose:

Term:

SECTION 1 INFORMATION ABOUT YOU — Complete this Section for all types of credit.

REVEAL AT YOUR OPTION Mr. Mrs. Ms. Miss	FIRST NAME	MIDDLE NAME	LAST NAME	ALIEN REGISTRATION*	DRIVER'S LICENSE NUMBER	SOCIAL SECURITY NUMBER
ADDRESS — NO. STREET CITY STATE ZIP CODE				TIME AT THIS ADDRESS Yrs. Mos.		TELEPHONE NUMBER
<input type="checkbox"/> OWN <input type="checkbox"/> RENT	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED (INCLUDES: SINGLE, DIVORCE OR WIDOWED)			<input type="checkbox"/> SEPARATED		
PREVIOUS ADDRESS — NO. STREET CITY STATE ZIP CODE				AGES OF DEPENDENT CHILDREN (OPTIONAL)		
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU				TELEPHONE NUMBER		
NEAREST RELATIVE'S ADDRESS — NO. STREET CITY STATE ZIP CODE						
Information about your employment and income. Please Note: If self employed or retired. We may request financial statements or income tax returns to verify income.						
EMPLOYER'S NAME AND ADDRESS, IF SELF EMPLOYED, STATE TYPE OF BUSINESS					TELEPHONE NUMBER	
POSITION/JOB TITLE				TIME ON JOB YRS. MOS.		MONTHLY INCOME \$
Other Income — Note: Income from alimony, child support or maintenance need not be listed unless you want it considered to obtain this credit. If you list such income, please complete Section 3.					MONTHLY INCOME \$	
DESCRIBE OTHER INCOME — SOURCE, TYPE ETC.					TOTAL MONTHLY INCOME \$	
PREVIOUS EMPLOYER — NAME AND ADDRESS				POSITION/JOB		TIME THERE
LOCATION OF REAL ESTATE OWNED OR BUYING				NAME IN WHICH TITLE IS CARRIED		PURCHASE PRICE \$

SECTION 2 INFORMATION ABOUT YOUR CREDIT REFERENCES — Complete this Section Whether applying for separate or joint credit: List Deposit Accounts — Name and Address of Banks, Savings & Loan Associations and Credit Unions.

CHECKING	BANK — NAME AND ADDRESS	ACCOUNT NUMBERS
SAVINGS	BANK — NAME AND ADDRESS	
SAVINGS	BANK — NAME AND ADDRESS	
OTHERS	NAME AND ADDRESS	

List outstanding debts and paid accounts — include alimony, child support and maintenance payments if applicable. Use reverse side if more space is required.

TYPE OF PAYMENT	NAME & ADDRESS OF CREDITOR	EXACT NAME IN WHICH ACCT. IS CARRIED	ACCOUNT NO.	BALANCE DUE	MO. PAYMENT
<input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE				\$	\$
AUTO				\$	\$
OTHER				\$	\$
OTHER				\$	\$
OTHER				\$	\$
OTHER				\$	\$

SECTION 3 INFORMATION ABOUT YOUR SPOUSE OR CO-APPLICANT

Complete this Section only if: 1. Your spouse will use this account or will be contractually liable for the account, or 2. You are relying on income from alimony, child support or maintenance, or 3. You are relying on your spouse's income or other community property to obtain this credit. Please remember that community property includes your employment income as well as that of your spouse, any property purchased with such income and any savings from such income.

FULL NAME OF SPOUSE, OR CO-APPLICANT				DRIVER'S LICENSE NUMBER	SOCIAL SECURITY NUMBER
ADDRESS — NO. STREET CITY STATE ZIP CODE				TELEPHONE NUMBER	
EMPLOYER'S NAME AND ADDRESS (IF SELF EMPLOYED, STATE TYPE AND NAME OF BUSINESS)					TELEPHONE NUMBER
				TIME ON JOB Yrs. Mos.	
Other Income — Note: Income from alimony, child support or maintenance need not be listed unless you want it considered to obtain this credit.					MONTHLY INCOME \$
DESCRIBE SOURCE AND TYPE OF OTHER INCOME					OTHER INCOME \$
					TOTAL INCOME \$

The information furnished above is true, complete and correct, and is submitted for the purpose of obtaining credit. I (We) authorize SHINHAN BANK AMERICA to gather whatever credit information it considers necessary and appropriate to reach a credit decision. If the requested credit is granted, I (We) also authorize the bank to give information to others. I (We) understand the bank will consider this application to be a continuing statement of financial condition and agree to notify the bank in writing of any material change in fact or financial condition. According to Federal Regulation B, the undersigned has the right to receive a Notice of Action Taken in the event the bank is unable to offer credit on terms requested and the undersigned has annual sales less than \$1.0 million. To receive the Notice of Action Taken, the undersigned must submit a written request to the bank within 60-days of the denial of credit, and the bank will reply within 30 days from the date of receipt of the request. Otherwise, the undersigned is deemed to have waived receipt of the Notice of Action Taken.

X
 Your signature

Birth Date

Date _____

X
 Spouse/Co-Applicant Signature

Birth Date