



6676 N. Lincoln Avenue  
 Lincolnwood, IL 60712-3631  
 (847) 679-2265  
 fax (847) 679-9077

**Personal Financial Information and Statement**

Individual Account — (Complete all sections except B)

Joint Account — (Complete all sections)

**We intend to apply for joint credit:**

**Applicant** \_\_\_\_\_ **Co-Applicant** \_\_\_\_\_  
 Initial

This financial statement  does  does not include all assets held in joint name with co-applicant and  all  none of the assets held in co-applicant's name alone.

**Section A Information Regarding Applicant**

E-Mail: \_\_\_\_\_

APPLICANT NAME		SOCIAL SECURITY NO.	DATE OF BIRTH	HOME TELEPHONE NO.
PRESENT STREET ADDRESS	CITY	STATE	ZIP CODE	YEARS THERE
EMPLOYER	POSITION	BUSINESS TELEPHONE NO.	YEARS THERE	
BUSINESS STREET ADDRESS	CITY	STATE	ZIP CODE	
<b>GENERAL INFORMATION</b>	DEFENDANT IN SUITS OR LEGAL ACTIONS OR JUDGMENTS OUTSTANDING? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please explain below.)			
	NO. OF DEPENDENTS	DATE OF YOUR WILL	EXECUTOR	
	HAVE ANY OF YOUR DEBTS EVER BEEN DISCHARGED, SATISFIED OR SETTLED UNDER THE BANKRUPTCY ACT? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, explain.)			

**Section B Information Regarding Co-Applicant**

E-Mail: \_\_\_\_\_

CO-APPLICANT NAME		SOCIAL SECURITY NO.	DATE OF BIRTH	HOME TELEPHONE NO.
PRESENT STREET ADDRESS	CITY	STATE	ZIP CODE	YEARS THERE
EMPLOYER	POSITION	BUSINESS TELEPHONE NO.	YEARS THERE	
BUSINESS STREET ADDRESS	CITY	STATE	ZIP CODE	
<b>GENERAL INFORMATION</b>	DEFENDANT IN SUITS OR LEGAL ACTIONS OR JUDGMENTS OUTSTANDING? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please explain below.)			
	NO. OF DEPENDENTS	DATE OF YOUR WILL	EXECUTOR	
	HAVE ANY OF YOUR DEBTS EVER BEEN DISCHARGED, SATISFIED OR SETTLED UNDER THE BANKRUPTCY ACT? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, explain.)			





### Statement of Income and Other Obligations

- Notes:** 1. Include information on spouse only if spouse is a joint applicant.  
 2. Income from alimony, child support or separate maintenance payments need not be revealed if you do not choose to have it considered as a basis for repaying your obligations to this bank.

Current Annual Income and Taxes	Other Obligations
For the year ended _____, _____	
Salary ..... \$ _____	Do you have any contingent liabilities? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No
Bonus ..... _____	If yes, give details:
Commissions ..... _____	As endorser, co-maker or guarantor ..... \$ _____
Income from assets:	On leases or contracts ..... \$ _____
Dividends and Interest ..... _____	
Real Estate ..... _____	Alimony, child support, separate maintenance, etc. .... \$ _____
Other ..... _____	Legal claims ..... \$ _____
Co-Applicant's Income — See Note 1:	Other special debt ..... \$ _____
Describe Briefly _____	Amount of contested income tax liabilities ..... \$ _____
_____	
_____	
Other Income — See Note 2: .....	
TOTAL ..... \$ _____	
Estimated Federal and State Income Taxes ..... \$ _____	

### Banks Or Finance Companies Where Credit Has Been Obtained

NAME AND ADDRESS OF LENDER	CREDIT IN THE NAME OF	SECURED OR UNSECURED	ORIGINAL DATE	HIGH CREDIT	CREDIT BALANCE

### Additional Information

I/We authorize Brickyard Bank to make whatever credit inquiries that it deems necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on this application. I/We authorize and instruct any person or consumer reporting agency to compile and furnish to Brickyard Bank any information that it may have or obtain in response to such credit inquiries and agree that such information, along with this application, shall remain Brickyard Bank's property whether or not credit is extended.

The information contained herein is submitted for the purpose of procuring, establishing and maintaining credit with you on behalf of the undersigned or persons, firms or corporations on whose behalf the undersigned may either severally or jointly with others execute a guaranty in your favor. The undersigned warrants that this completed financial statement has been carefully read and is true, correct, and complete and that you may consider this statement as continuing to be true, correct, and complete until a written notice of change is given to you by the undersigned.

Signature _____	Date Signed _____, _____
APPLICANT	
Signature _____	Date Signed _____, _____
CO-APPLICANT	

