

SISSY'S LOG CABIN

SFNB PBNB

PREFERRED CUSTOMER APPLICATION

NAME _____

MAILING ADDRESS _____

PHYSICAL (OR 911) ADDRESS _____

SOC. SEC. # _____ DATE OF BIRTH _____

PHONE # (CELL) _____ (HOME) _____

EMPLOYED BY _____ NO. YRS. _____

EMPLOYER ADDRESS _____

PHONE # _____

OCCUPATION _____ YEARLY INCOME _____

NAME OF NEAREST RELATIVE _____

THEIR ADDRESS (MUST NOT BE YOURS) _____

PHONE # _____

SECOND RELATIVE _____

THEIR ADDRESS (MUST NOT BE YOURS) _____

PHONE # _____

EMAIL (optional) _____

NOTICE — I UNDERSTAND AND AUTHORIZE THAT MY APPLICATION WILL BE USED TO OBTAIN ANY INFORMATION FROM ANY SOURCE REQUIRED CONCERNING THE STATEMENTS IN THIS APPLICATION AND TO VERIFY STATEMENTS FROM ANY SOURCE NAMED HEREIN AND TO GENERALLY INQUIRE INTO MY CREDIT RECORD. ALSO IN CONNECTION WITH THIS APPLICATION AN INVESTIGATION CONSUMER REPORT INCLUDING INFORMATION AS TO CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING, WHICHEVER ARE APPLICABLE, MAY BE REQUESTED BY SISSY'S LOG CABIN. I CERTIFY THAT I HAVE READ THIS APPLICATION AFTER IT WAS COMPLETED AND THAT ALL INFORMATION IS CURRENT AND COMPLETE.

TYPE OF CREDIT REQUESTED

IMPORTANT: Check (✓) the appropriate boxes below

- INDIVIDUAL CREDIT** - relying solely on my income or assets.
- INDIVIDUAL CREDIT** - relying on my income or assets as well as income or assets from other sources.
- JOINT CREDIT** - We intend to apply for joint credit. (initials) _____

PREFERRED CUSTOMER SIGNATURE

DATE