



ConnectOneBank

ConnectOneBank.com

Consumer Loan Application

Thank you for your interest in a Consumer Loan with ConnectOne Bank. Attached, please find your loan application.

Please complete and sign the attached application and Credit Authorization Form and email it to us at consumerloans@cnob.com or fax it over to us at 908-206-2673.

Below is a checklist of items we'll need to complete your application process:

- ✓ Copies of your 2 most recent W-2 forms. If you are self-employed, a full copy of your two most recent years of filed tax returns is required.
- ✓ Current pay stubs covering 1 month's income

If you have any questions, please do not hesitate to reach out to us at 844-266-2548

CONSUMER LOAN APPLICATION

CREDIT REQUESTED				COLLATERAL OFFERED			
Amount Requested	# of Payments			<input type="checkbox"/> Titled / Vehicle	<input type="checkbox"/> Deposit Account/Investments	<input type="checkbox"/> Other	<input type="checkbox"/> Unsecured
Description of Collateral Offered							
Purpose of Credit Request							
				Credit Requested is: <input type="checkbox"/> Personal Loan <input type="checkbox"/> Auto Loan <input type="checkbox"/> Cash Reserve			
APPLICANT				CO-APPLICANT			
If the Applicant is married, he or she may apply for individual credit.							
Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer				Applicant's Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Guarantor <input type="checkbox"/> Co-Signer			
Name				Name			
Date of Birth		SSN		Date of Birth		SSN	
Driver's Lic. #		Exp. Date		Driver's Lic. #		Exp. Date	
Home Street Address			Yrs/Mos.	Home Street Address			Yrs/Mos.
City, State, Zip			County	City, State, Zip			County
Home Phone		Cell Phone		Home Phone		Cell Phone	
E-Mail Address				E-Mail Address			
# of Dependents		Ages of Dependents		# of Dependents		Ages of Dependents	
Previous Address (if current less than 2 years)			Yrs/Mos.	Previous Address (if current less than 2 years)			Yrs/Mos.
City, State, Zip				City, State, Zip			
EMPLOYMENT INFORMATION - APPLICANT				CO-APPLICANT			
Business Name/Employer <input type="checkbox"/> Self Employed				Business Name/Employer <input type="checkbox"/> Self Employed			
Business/Employer Street Address				Business/Employer Street Address			
City, State, Zip				City, State, Zip			
Business Phone		Monthly Income		Business Phone		Monthly Income	
Position/Title		From	To	Position/Title		From	To
Previous Business Name/Employer <input type="checkbox"/> Self Employed				Previous Business Name/Employer <input type="checkbox"/> Self Employed			
Business/Employer Street Address				Business/Employer Street Address			
City, State, Zip				City, State, Zip			
Business Phone		Monthly Income		Business Phone		Monthly Income	
Position/Title		From	To	Position/Title		From	To
PERSONAL REFERENCES - APPLICANT				CO-APPLICANT			
Name			Relationship	Name			Relationship
Address			Phone	Address			Phone
Name			Relationship	Name			Relationship
Address			Phone	Address			Phone
Name			Relationship	Name			Relationship
Address			Phone	Address			Phone

Credit Authorization

1. To all consumer-reporting agencies and to all creditors and depositories of the undersigned:

Please be advised that the undersigned, and each of them, has made application to:

ConnectOne Bank

requesting an extension of credit to the undersigned. Therefore, the undersigned, and each of them, hereby authorizes you to provide credit report and/or a disclosure to Lender or any agent or balance. The undersigned also authorizes you to disclose your deposit or credit experiences with the undersigned to Lender or to third parties.

2. In addition, the undersigned, and each of them, hereby authorizes Lender to disclose to any third party, or any agent or employee thereof, information regarding the deposit or credit experience with any of the undersigned.

3. A photographic or carbon copy of this authorization bearing a photographic or carbon copy of the signature(s) of the undersigned may be deemed to be equivalent to the original hereof and may be used as a duplicate original.

Borrower	Date	Co-Borrower	Date
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Evidence of Joint Application

Date: _____

Lender: ConnectOne Bank

Borrowers: _____

Property Address: _____

If you are applying for joint credit with another person, please sign below.

We intend to apply for joint credit.

Borrower **Date**

Co -Borrower **Date**