



NAME:

DATE OF BIRTH:

ADDRESS:

SOCIAL SECURITY #:

HOME PHONE:

POSITION OR OCCUPATION:

EMAIL:

BUSINESS/EMPLOYER NAME:

YEARS EMPLOYED:

BUSINESS ADDRESS:

BUSINESS PHONE:

THIS FINANCIAL STATEMENT IS:  INDIVIDUAL  JOINT (IF JOINT, PLEASE COMPLETE THE FOLLOWING INFO)

JOINT NAME:

DATE OF BIRTH:

ADDRESS (if different from above):

SOCIAL SECURITY

POSITION OR OCCUPATION:

EMAIL:

BUSINESS/EMPLOYER NAME:

YEARS EMPLOYED:

BUSINESS ADDRESS:

BUSINESS PHONE:

*YOU MAY APPLY FOR CREDIT INDIVIDUALLY OR JOINTLY WITH ANOTHER PARTY.*

If you are applying for joint credit with another party, use separate financial statement if borrowers are not joint applicants. Reflect your personal financial condition in this statement as well as the financial condition of your spouse if:

1. You are applying for credit jointly with your spouse, or
2. You are applying on your spouse's income or assets in requesting credit, or
3. You are providing this statement to support previously extended joint credit with your spouse.

**PLEASE LIST AMOUNTS IN DOLLARS, OMITTING CENTS.**

ASSETS	AMOUNT	LIABILITIES & NET WORTH	AMOUNT
Dep. In banks & other financial institutions (Sch. 1)		Accounts payable	
Cash value of life insurance (Sch. 2)		Loans on life insurance (Sch. 2)	
Notes and accounts receivable		Taxes due – income	
Marketable stocks & bonds (Sch. 3)		Loans due Bank of Oak Ridge	
Stock in closely held corporations (Sch. 4)		Liabilities of proprietorships	
Assets of proprietorships		Liabilities of partnerships or joint ventures	
Assets of partnerships & joint ventures		Loans on vehicles, boats, mach. & equip. (Sch 5)	
Vehicles, boats, machinery & equipment (Sch.5)		Loans on real estate (Sch. 6)	
Real estate (Sch. 6)		Other loans payable (Sch. 9)	
Vested interest in pension/retirement accts. (Sch. 7)		Other Liabilities	
Other assets (Sch. 8)		<b>Business loan/revolving</b>	
		TOTAL LIABILITIES	
		NET WORTH	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES &amp; NET WORTH</b>	

**Please complete all appropriate schedules – attach an additional sheet if more space is needed.**

SCHEDULE 1

**DEPOSIT ACCOUNTS**

Name of Bank, Savings and Loan, etc., and location	Checking, Money Market	Savings, CDs, etc.
Totals		

SCHEDULE 2

**LIFE INSURANCE**

Name of Person Insured	Face Amount	Cash Value	Policy Loans	Policy Assigned?
TOTAL				

SCHEDULE 3

**MARKETABLE STOCKS AND BONDS (NYSE, AMEX, NASDAQ)**

No. of shares/ Face val. (bonds)	Description	Registered in Name of:	To Whom Pledged:	Date Acquired	Cost	Market Value
TOTAL						

SCHEDULE 4 **STOCK IN CLOSELY-HELD CORPORATIONS (Please provide f/s if total value exceeds 10% of your net worth)**

Name Of Corporation	Stock In The Name Of	No. Of Shares Owned	Value Of Shares Owned	Annual Statement Date	Total Shares Outstanding	Stockholders Equity
TOTAL						

SCHEDULE 5

**VEHICLES, BOATS, MACHINERY AND EQUIPMENT**

Description (Include Year, Make & Model)	Year Acquired	Cost	Market Value	Loan Balance	Loan Payable To:	How Payable
TOTAL						



SOURCES OF INCOME		CONTINGENT LIABILITIES	
FOR YEAR ENDED: (A copy of your most recent Income Tax Return may be requested)		Are you indirectly liable for obligations of others? If so, list and describe. Please attach an additional sheet of paper if you need more space.	
SALARIES: YOURS		Name: Amount: Description:	
JOINT APPLICANT'S			
BONUSES & COMMISSIONS		Name: Amount: Description:	
DIVIDENDS			
INTEREST		Total amount as endorser, co-maker or guarantor \$ _____	
NET PROFITS FROM		PERSONAL INFORMATION	
RENTAL PROPERTY		Number of Dependents:                      Ages:	
PROPRIETORSHIPS		Are you obligated to pay alimony, child support or separate maintenance payments? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide details:	
PARTNERSHIPS		Are you a defendant in any lawsuits or legal actions? If so, provide details:	
JOINT VENTURES			
		Have you ever declared bankruptcy or had any judgments recorded against you? If so, provide details:	
OTHER INCOME: (Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)		Date:    City:    County: State:	
		Amount: Description:	
		Do you have a will? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who is the executor?	
TOTAL INCOME:		Do you have disability insurance? If so, what is the monthly amount? What years are covered?	

**REPRESENTATIONS AND WARRANTIES**

The information contained in this statement is provided to induce Bank of Oak Ridge to extend or to continue the extension of credit to the undersigned or to others upon the guaranty of the undersigned. The undersigned acknowledge and understand that Bank of Oak Ridge is relying on the information provided herein in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants and certified that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify Bank of Oak Ridge immediately and in writing of any change in name, address, or employment and of any material adverse change: (1) in any of the information contained in this statement, or (2) in the financial condition of any of the undersigned, or (3) in the ability of any of the undersigned to perform its obligations to Bank of Oak Ridge. In the absence of such notice or a new full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify Bank of Oak Ridge as required above, or if any information herein should prove to be inaccurate or incomplete in any material respect, Bank of Oak Ridge may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable, Bank of Oak Ridge is authorized to make all inquiries it deems necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the undersigned. The undersigned authorize any person or consumer-reporting agency to give Bank of Oak Ridge any information they may have on the undersigned. Each of the undersigned authorizes Bank of Oak Ridge to answer questions about Bank of Oak Ridge's credit experience with the undersigned. As long as any obligation or guaranty of the undersigned to Bank of Oak Ridge is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give Bank of Oak Ridge shall be Bank of Oak Ridge's property.

**THE UNDERSIGNED HAVE READ AND FULLY UNDERSTAND THE FOREGOING REPRESENTATION AND WARRANTIES.**

DATE:

YOUR SIGNATURE:

DATE:

JOINT SIGNATURE (if joint financial statement):

Bank use only: This statement rec'd by:	Date:	
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