



- Personal Use
- Business Use
- Co-Applicant



1325 Harrison Street
 P.O. Box 4327
 Batesville, AR 72503
 715-598-1539
 715-835-5098 FAX

IMPORTANT APPLICANT INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

This application is for secured credit only.

Joint Credit.
 We intend to apply for joint credit.
 (Initials) _____

Date	Sales Person	Dealer Name	Telephone Number
Requested Amount	# Payments	Dealer #	Fax Number

Applicant Information

Last Name	First Name	Middle Name	Banking Information <i>Are you or have you ever been a customer of First Community Bank?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
Present Street Address	Apt. #		<i>Check all that apply:</i> <input type="checkbox"/> Checking <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> Savings <input type="checkbox"/> M/C <input type="checkbox"/> Amex
City	State	Zip Code	Landlord or Mortgage Holder
Time at Address (<i>if less than 2 years, give previous address</i>)	Home Telephone	Payment	<input type="checkbox"/> Buy <input type="checkbox"/> Parents <input type="checkbox"/> Rent <input type="checkbox"/> Others
Previous Address	Name of Nearest Relative Not Living with You		
Social Security #	Date of Birth	Address	
Drivers License Number	Telephone Number		
Mailing Address (If Different From Above)	Applicant Salary: \$ _____ Gross Monthly		
City	State	Zip Code	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. Alimony, child support, separate maintenance received under: ___ Court Order ___ Written Agreement ___ Oral Understanding
Current Employer (If Self-Employed, Business Name)	How Long? Yrs ___ Mos ___	Sources of Other Income _____ Amount Per Month \$ _____	
Employer Address	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried* *Includes single, divorced or widowed		
Business Phone #	Position		

Equipment Information (Attach dealer invoice if available)

Quantity	Model #s	Description	Serial #	Price
1.	_____	_____	_____	\$ _____
2.	_____	_____	_____	\$ _____
3.	_____	_____	_____	\$ _____

This Application for Credit ("Application") is to First Community Bank ("FCB"). I have read this Application, and everything stated in it is true. I authorize FCB to check my credit, employment history, or any other information, and to report such information, and its credit experience with me, to others. I am at least 18 years of age.

I hereby certify that the property purchases pursuant to this application is for my personal and/or business use; that I am fully responsible for making all payments for such property; that such property will be in my possession or under my control until the amount financed and all finance charges have been paid in full; and that I am not purchasing any property financed through FCB for the benefit of another without the written approval of FCB. I understand that I must update credit information at FCB's request if my financial condition changes.

Signature (Applicant) _____ Date _____