Clay County State Bank
Business Application

Date_____

Applicant	***Co-Borrower***
Name_____	Name_____
Address_____	Address_____
Birthdate_____	Birthdate_____
Social Sec. #_____	Social Sec.#_____
Phone #'s Home_____ Work_____ Cellular_____	
E-Mail_____ Other_____	
Present Employer_____	Present Employer_____
Years There_____	Years There_____
Mo. Net Salary_____	Mo. Net Salary_____

Name and type of business_____
Address of business_____

Officers or Principals	Title	Home Address
_____	_____	_____
_____	_____	_____
_____	_____	_____

Purpose of Loan_____

Amount Requested $_____ Repayment Plan_____

Security_____( ) U.C.C. ( ) Title

Present Accounts with us: Checking No_____ $_____
Savings No. _____ $_____

Previous Banking Connection_____
All Outstanding Loans:

To whom Due	Address	Date Incurred	Orig. Amt.	Balance Due

Date of Last Financial Statement_____ Date of Resolution_____Required to Sign_____

I hereby certify that all of the statements are true and complete and are made for the purpose of obtaining a loan from the Clay County State Bank in the amount of $_____ for a period of _____months.The funds are to be used for_____.

"For the purpose of determining my eligibility for credit, you are authorized to procure consumer reports from credit reporting agencies and to obtain personal and credit information from persons other than consumer reporting agencies."

Signed_____(Title)

☐ Approved Officers Int_____ _____(Title)

☐ Not Approved Reason: