



ONE PACIFIC COAST BANK, FSB

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1. PLEASE GIVE US YOUR CONTACT INFORMATION.

FIRST NAME	M. INITIAL	LAST NAME	BUSINESS NAME OF APPLICANT/BORROWER	BUSINESS PHONE ()
HOME ADDRESS	CITY	STATE	ZIP	HOME PHONE ()

2. PLEASE LIST YOUR ASSETS... & YOUR LIABILITIES...

ASSETS & LIABILITIES LISTED AS OF (DATE)

Cash on hand & in banks \$ _____	Accounts payable \$ _____
Savings accounts \$ _____	Notes payable to banks and others (describe in 2B) \$ _____
IRA or other retirement account \$ _____	Installment account monthly payment \$ _____ (auto) \$ _____
Accounts & notes receivable \$ _____	Installment account monthly payment \$ _____ (other) \$ _____
Life insurance—cash surrender value only (complete 2H) \$ _____	Loan on life insurance \$ _____
Stocks and bonds (describe in 2C) \$ _____	Mortgages on real estate (describe in 2D) \$ _____
Real estate (describe in 2D) \$ _____	Unpaid taxes (describe in 2F) \$ _____
Automobile – present value \$ _____	Other liabilities (describe in Section 2G) \$ _____
Other personal property (describe in 2E) \$ _____	Total liabilities \$ _____
Other assets (describe in 2E) \$ _____	Net worth \$ _____
TOTAL \$ _____	TOTAL \$ _____

2A. SOURCE OF INCOME

CONTINGENT LIABILITIES

Salary \$ _____	As endorser or co-maker \$ _____
Net investment income \$ _____	Legal claims & judgments \$ _____
Real estate income \$ _____	Provision for Federal income tax \$ _____
Other income (describe below) \$ _____	Other special debt \$ _____

DESCRIPTION OF OTHER INCOME IN 2A (Please disclose alimony or child support payments if you want such payments counted toward total income for OPCB loan application.)

2B. NOTES PAYABLE TO BANKS AND OTHERS. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and address of noteholders(s)	Original balance	Current balance	Payment amount	Payment Frequency	How secured or endorsed (type of collateral)
	\$	\$	\$	<input type="checkbox"/> Mo <input type="checkbox"/> Other _____	
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		
	\$	\$	\$		

2C. STOCKS AND BONDS. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Number of shares	Name of securities	Cost	Market value quotation/exchange	Date of quotation/exchange	Total value
		\$	\$		\$
		\$	\$		\$
		\$	\$		\$
		\$	\$		\$
		\$	\$		\$



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2D. REAL ESTATE OWNED. (List each parcel separately. Use attachments if necessary. Each attachment must be identified a part of this statement and signed.)

	Property 1	Property 2	Property 3
Type of property			
Street address			
City/state/ZIP			
Date purchased			
Original cost	\$	\$	\$
Present market value	\$	\$	\$
Name of mortgage holder			
Street address of holder			
City/state/ZIP of holder			
Mortgage account number	#	#	#
Mortgage balance	\$	\$	\$
Amount of payment	\$_____/month \$_____/year	\$_____/month \$_____/year	\$_____/month \$_____/year
Status of mortgage			

2E. OTHER PERSONAL PROPERTY AND OTHER ASSETS. (Describe property. If any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and, if delinquent, describe delinquency.)

2F. UNPAID TAXES. (Describe in detail: type of tax, to whom payable, when due, amount due. Indicate any tax liens attached to property.)

2G. OTHER LIABILITIES. (Describe in detail.)

2H. LIFE INSURANCE HELD. (Give face amount and cash surrender value of policies—name of insurance company and beneficiaries.)

3. PLEASE READ THE AGREEMENT AND SIGN THIS STATEMENT

By signing below, you authorize One PacificCoast Bank to make inquiries as necessary to verify the accuracy of the statements made and to determine your creditworthiness. You certify the above and statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. By signing, you agree that it is a Federal crime, punishable by fine or imprisonment or both to knowingly make any false statements concerning information requested on this application, under the provisions of Title 18 United States Code, Section 1014.

SIGNATURE	DATE	SOCIAL SECURITY NUMBER ____ - ____ - _____
SIGNATURE	DATE	SOCIAL SECURITY NUMBER ____ - ____ - _____

FOR BANK USE

OFFICER	APPROVED BY	CONCURRENCE BY	COMMITTEE DATE	DECISION DATE	DEPARTMENT	APP DATE	APPLICATION #	COMMITMENT #	LOAN #
DECISION AND COMMENTS <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Incomplete <input type="checkbox"/> Counteroffer <input type="checkbox"/> Conditional Approval <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other_____									