



New Credit Line Request

Renew/Increase Credit Line Request:

Purpose of Line: <input type="radio"/> Business/Commercial <input type="radio"/> Personal	Account #
Financial Professional Firm/Financial Professional Contact Name	Financial Professional Phone No./Email

Trust Information

Name of Trust:	TIN #
Address (no P.O. Box) Address City State Zipcode	Phone #

Beneficiary Information

Beneficiary Name	Date of Birth
Address (no P.O. Box) Address City State Zipcode	Phone #
Beneficiary Name	Date of Birth
Address (no P.O. Box) Address City State Zipcode	Phone #
Beneficiary Name	Date of Birth
Address (no P.O. Box) Address City State Zipcode	Phone #

Trustee Information

Trustee Name	Date of Birth
Address (no P.O. Box) Address City State Zipcode	Phone #
Email Address*	
Trustee Name	Date of Birth
Address (no P.O. Box) Address City State Zipcode	Phone #
Email Address*	
Trustee Name	Date of Birth
Address (no P.O. Box) Address City State Zipcode	Phone #
Email Address*	
Trustee Name	Date of Birth
Address (no P.O. Box) Address City State Zipcode	Phone #
Email Address*	

*Note-email address is not collected for commercial marketing purposes.
Bank does not sell or distribute your email address for commercial marketing purposes.



Information Regarding Whole Life Policy

Please attach any additional Policy Information

Name of Life Insurance Company

Policy #

Owner of Policy

Date of Birth

Social Security #

Insurance Credit Line must be secured by a valid assignment of life insurance policy as collateral. Everything I/we have stated in this applications is true and correct. You may retain this application whether or not this application is approved. I/we authorize you to obtain my/our credit and employment history and also to obtain credit reports for the purposes of reviewing and maintaining my/our account, conducting any collection activities and to report to others your credit experience with me. I/we further authorize you to contact my/our life insurance agent and/or life insurance company listed above to obtain information about my/our policy, discuss this application, and obtain information about an assignment of my/our policy.

Interest Payment Options

Automatic Interest Payments

If you would like payments deducted from an account maintained here or at another financial institution, an Automated Clearing House (ACH) form (Loan Payment Option Form) is provided as an addendum to this Application or will be provided with any collateral assignment form you must sign.

Bill Applicant/Trustee

Note: If payment is not made within 15 days after the due date, the Bank reserves the right, in its sole and absolute discretion, to capitalize the amount due into principal subject to your Credit Limit and Collateral Value*.

* The terms for the credit limit under the CSV LOC agreement
"Collateral Value" means any amount equal to the sum of the then cash surrender value of the insurance policies being used as collateral for the CSV LOC multiplied by ninety-five percent (95%) conversion of interest to principal appear in your CSV LOC Agreement attached hereto and made a part hereof.

Important Information About Procedures For Opening A New Account For A Loan

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. If you presently have an account with us and you open additional accounts, add joint owners to an existing account or make application for an additional loan, we must also obtain, record and verify required identification information as listed above. Strict adherence to these regulations helps to protect both financial institutions and bank customers from criminal activity.

Signature _____

Signature _____

Trustee Name _____

Trustee Name _____

Date _____

Date _____

Signature _____

Signature _____

Trustee Name _____

Trustee Name _____

Date _____

Date _____