



CONSUMER LENDING, 904 Poquonnock Road, Groton, CT 06340

CREDIT APPLICATION						
<input type="checkbox"/> Joint Credit - applying for credit with another person, complete all sections, providing information in Section B about this joint application. (Both must sign below). We, the undersigned, are submitting an application for credit for the purpose of _____ By signing below, We are confirming that we are applying for individual credit or joint credit as indicated above. Signature: _____ Date: _____ Signature: _____ Date: _____						
Amount Requested \$ _____	For How Long _____ Monthly _____	Proceeds of Loan to Be Used For:				
SECTION A - INDIVIDUAL APPLICANT INFORMATION						
Borrower's Name (Include Jr. or Sr. if applicable)						
Birth Date	Home Phone	Driver's License No.	Social Security No.	No. Dependents	Ages of Dependents	
Address (Street, City, State & ZIP)				County	OWN ___ RENT ___	How Long
Former Address (Street, City, State & ZIP)				County	OWN ___ RENT ___	How Long
Name and Address of Nearest Relative Not Living With You			Relationship	Telephone No. (Including Area Code)		
Name and Address of Employer					How Long	
Business Phone (Incl. Area code)		Position or Title	How Often Paid	Gross-Income \$ _____		
Previous Employer (Company Name & Address)						
Alimony, child support, or separate maintenance income need not to be revealed if you do not wish to have it considered as a basis for repaying this obligation.						
Alimony, child support, or separate maintenance received under _____ Court Order ___ Written Agreement ___ Oral Understanding						
Sources of Other Income					Amount Per Month \$ _____	
Is any income listed in this Section likely to be reduced before the credit request is paid off? ___ No ___ Yes (Explain)				Have you previously received credit from us? ___ No ___ Yes-When?		

SECTION B - JOINT APPLICANT OR OTHER PARTY INFORMATION

Complete only if for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property state.

Co-Borrower's Name (include Jr. or Sr. if applicable)					
Birth Date	Home Phone	Driver's License No.	Social Security No.	No. Dependents	Ages of Dependents
Relationship to Applicant (If any)		Present Address (Street, City, State & ZIP)			How Long
Name and Address of Employer					Yrs. on this job
Business Phone (Inc. area code)		Position or Title	How Often Paid	Gross-Income	
				\$	
Previous Employer (Company Name & Address)					Date (From-To)
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, or separate maintenance received under _____ Court Order _____ Written Agreement _____ Oral Understanding					
Sources of Other Income					Amount Per Month
				\$	
Is any income listed in this Section likely to be reduced before the credit request is paid off? ____ No ____ Yes (Explain)			Have you previously received credit from us? ____ No ____ Yes-When?		

SECTION C

Complete the following Information about both the Applicant and Joint Applicant or Other Person (if applicable):

Are you obligated to make Alimony, Support or Maintenance Payments?	____ Yes ____ No
If yes, to (Name & Address) _____	Amount per month \$ _____
Are you a co-maker, endorser, or guarantor on any loan or contract?	____ Yes ____ No
If yes, for whom? _____	To whom? _____
Are there any unsatisfied judgements against you? ____ Yes ____ No	If yes, to whom owed? _____ Amount \$ _____
Have you been declared bankrupt in the last 10 years? ____ Yes ____ No	If yes, where? _____ Year? _____

SECTION D - ASSET & DEBT INFORMATION

If section B has been completed, this section should be completed giving information about both the Applicant and Joint Applicant or Other Person.

Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

ASSETS OWNED

(Use separate sheet if necessary).

DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS CARRIED	SUBJECT TO DEBT?	VALUE
CHECKING ACCOUNT NUMBER(S)			\$
SAVINGS ACCOUNT NUMBER(S)			
MARKETABLE SECURITIES (issuer, type, no. of shares)			
REAL ESTATE (location, date acquired)			
LIFE INSURANCE (issuer, face value)			
AUTOMOBILES (year, make, model)			
OTHER (list)			
TOTAL ASSETS			\$

OUTSTANDING DEBT (include charge accounts, installment contracts, credit cards, rent, mortgages and other obligations. Use separate sheet if necessary)					
CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent <input type="checkbox"/> Mortgage		\$	\$	\$
TOTAL DEBTS			\$	\$	\$

I/We understand that the Credit Protector Plan described below is not required to obtain this loan.

I/We have been advised and understand that in the event of my death, Credit Life benefits would pay in full* the balance of my installment contract. I/We want Credit Life Insurance.

I have been advised and understand that in the event of my inability to work due to sickness or injury the Creditor Disability benefits would make payments* on my installment contract. I want Credit Disability Insurance.

X _____

X _____

X _____

Notwithstanding the benefits described above. I/We hereby decline and waive such benefits.

Notwithstanding the benefits described above. I/We hereby decline and waive such benefits.

X _____

X _____

X _____

X _____

*Subject to the terms and provisions of the insurance certificate issued to you.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may discriminate neither on the basis of this information nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

BORROWER I do not wish to furnish this information.

CO-BORROWER I do not wish to furnish this information.

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: American Indian or Alaska Native
 Native Hawaiian or Other Pacific Islander
 Asian Black or African American
 White

Race: American Indian or Alaska Native
 Native Hawaiian or Other Pacific Islander
 Asian Black or African American
 White

Sex: Female Male

Sex: Female Male

To be Completed by Interviewer

This application was taken by:
 Face to face interview
 Mail
 Telephone

Interviewer's Name (print or type)

Name and Address of Interviewer's Employer

Interviewer's Signature

Date

I/We hereby authorize CHELSEA GROTON SAVINGS BANK, its agents, affiliates, subsidiaries, successors and/or assigns, to share and verify my/our past and present employment earnings records, bank accounts, loan accounts and loan experience, appraisal, credit/debit card accounts and experience, stock holdings and other asset and/or credit/debit balances needed to process this loan application. I further authorize CHELSEA GROTON SAVINGS BANK, its agents, affiliates, subsidiaries, successors and/or assigns to check my/our credit record and to order, receive and exchange a consumer credit report and other information about my credit history, including past and present mortgage/landlord references. The information obtained is to be used in the processing and quality control of my application for this loan.

SIGNATURES - I certify that everything I have stated in this application and on my attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

Applicant's Signature

Date

Other Signature (Where Applicable)

Date

DISCLOSURE STATEMENT FOR CREDIT INSURANCE

In this Disclosure Statement, the words "you" and "your" mean each and every applicant signing below. The words "we", "us", "our" and "the bank" mean Chelsea Groton Savings Bank, One Franklin Square, Norwich, Connecticut 06360-0151.

You are applying for credit with us, the bank. If your application is approved, we will be offering you the opportunity to purchase credit life insurance and/or Accident & Health insurance, Guaranteed Auto Protection (where applicable), and Credit Account Protection (C.A.P.) in connection with your credit application (called "credit insurance"). This insurance is voluntary. You do not have to obtain it. This disclosure statement provides you with important information regarding that credit insurance. If you have any questions call us at (860) 823-4800.

In connection with your credit application, we, the bank, advise you of the following:

We, the bank, may not condition the extension of credit you are applying for on whether you purchase an insurance product or annuity from the bank or the bank's affiliate.

We, the bank, may not condition the extension of credit you are applying for on your agreement not to obtain, or a prohibition of your obtaining an insurance product or annuity from an entity not affiliated with the bank.

Insurance products and annuities:

Are not a deposit or other obligation of, or guaranteed by, the bank or any affiliate of the bank.

Are not insured by the Federal Deposit Insurance Corporation (FDIC) or any other agency of the United States, the bank, or affiliates of the bank.

Credit Insurance may be purchased from an insurance producer (commonly referred to as an "insurance agent") of your choice. The selection of another insurance producer will not affect our credit decision.

(The Appropriate Box Below is Checked :)

Person Application. Please sign below to acknowledge having received this disclosure from us orally and in this written form.

Mail Application. We have provided multiple copies of this disclosure statement. Each applicant must sign below to acknowledge the receipt of this disclosure statement along with your application. Please retain a copy for your records and then return a signed copy of this disclosure statement along with your credit application. We cannot fully process your request for credit unless we received a copy of this disclosure signed by each applicant.

Telephone Application. By signing below, you acknowledge that the disclosures (set forth above) were provided to you orally over the phone before completion of the sale of credit insurance. You also acknowledge the receipt of this written disclosure form. Please return a copy of this disclosure statement to us signed by each applicant. It is important for our records. We have included additional copies for your records.

Date: _____

Name of Customer: _____

Signature of
Customer: _____

Date: _____

Name of Customer: _____

Signature of
Customer: _____

Date: _____

Name of Customer: _____

Signature of
Customer: _____