# **Consumer Credit Application**

CREDIT REQUEST							
AMOUNT REQUESTED: \$		PURPOSE OF LOAN / LINE	:				
Type of Credit Requested:		•					
Personal ExpressLine of Credit Only							
		verdraft Protection for Checking Account	:#				
Personal ExpressLine of	Credit increase	e for Loan #					
Personal Loan				' <b>\</b>			
□ PV Power Loan: □ 60 n □ Auto Loan: Year:		nonths	ng Loan (48 Month 1	erm)			
		ateral Loan Requests section on Page 3.)					
REQUIREMENTS CHECKLIST  TRUST APPLICANTS   Allow ac	dditional time for	r completion of a Trust Review.					
		st complete the applicable Co-Applicant s	sections.				
☐ For requests up to \$20,000, p	provide short fo	orm Trust Agreement and Amendments. m Trust Agreement and Amendments.					
REQUIRED INCOME VERIFICATION			teral Loans.				
If amount requested is over							
		ods must be provided for all applicants, u		(see below).			
→ All self-employed applica	•	Federal Income Tax Returns must be pro	ovided for:				
◆ If rental income is to be considered.							
If amount requested is over \$25,000:							
	☐ Copies of pay stubs for the last 2 pay periods and						
$\Box$ The last 2 years' personal Federal Income Tax Returns must be provided for <u>all applicants</u> .							
Credit Approval is subject to verification of information and may require the receipt of additional documentation.							
APPLICATION TYPE	APPLICATION TYPE						
☐ Applying as an INDIVIDUAL	<b>INDIVIDUAL</b> credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete all blanks except Co-Applicant sections.						
☐ Applying for <b>JOINT</b> Credit		vith a Co-Applicant or Trustee.	Applicant Initia	Applicant Initials:			
(Co-Applicant or Trustee)	* Complete all sections <u>and</u> <b>Primary Applicant</b> * <b>AND Co-Applicant or Trustee</b> must both initial.		Co-Applicant o	Co-Applicant or Trustee Initials:			
□   AUTOMATIC PAYMENT				Checking / Savi	ngs Account #		
I authorize Central Pacific Bank to withdraw the minimum payment(s) due from the account listed here. I agree that this authorization will not be cancelled until the loan and/or line is paid in full, or I revoke this authorization in writing.							
BASIC INFORMATION		PRIMARY APPLICANT	CO-APPLICAI	CO-APPLICANT / TRUSTEE			
Last Name, First Name, Initial, Suffix							
Social Security #							
Date of Birth (MM/DD/YYYY)							
Mother's Maiden Name							
Home Phone Number							
Mobile Phone Number							
Email Address							
Home Address (PO box not allowed)							
City, State, Zip							
Mailing Address (if different)							
Own / Rent?   Monthly Payment		☐ Own ☐ Rent   \$	□ Own □ R	ent   \$			

### CENTRAL PACIFIC BANK

### **Consumer Credit Application**

EMPLOYMENT INFORMATION	PRIMARY APPLICANT	CO-APPLICANT / TRUSTEE
Employer Name		
Position & Occupation (if employed)		
Employer Phone Number		
Length of Employment		
How long in this line of work?		
MONTHLY GROSS INCOME	PRIMARY APPLICANT	CO-APPLICANT / TRUSTEE
Gross Monthly Employment Income		
Other Income**		
Source of other income		
PERSONAL REFERENCE INFORMATION		
(Leave blank if applying for a Collateral Loan.)	PRIMARY APPLICANT	CO-APPLICANT / TRUSTEE
Name		
Home Address		
City, State, Zip		
Home Phone Number		
Mobile Phone Number		
Relationship		

<sup>\*\*</sup>NOTE: 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.

#### APPLICATION AGREEMENT | All Applicants MUST Complete This Section

#### PLEASE READ CAREFULLY AND SIGN (APPLICANT AND CO-APPLICANT, IF ANY):

By signing below and submitting this Consumer Credit Application (this "Application"), Applicant and, if applicable, Co-Applicant (individually or together, "you" or "your") agree with Central Pacific Bank ("we", "us," or "our") as follows: (1) You are applying for separate individual credit unless otherwise indicated in the Applying for Joint Credit box above; (2) You are asking us (as indicated by the box checked in "Type of Credit Requested" above) to make a personal term loan to you, or to open a new line of credit or to increase the credit limit on an existing line of credit; (3) You represent and warrant to us that all information you have provided above, on Page 2 and 3 of this Application if applicable, or otherwise to us is true and correct, and you authorize us to verify all such information and to report and exchange credit information about you, both now and in the future, by any means including the use of consumer credit reports and communication with credit bureaus and others; and (4) You agree that we may, but are not required to, accept this Application or any other document executed by you and sent by facsimile transmission and, if accepted by us, the existence of a facsimile signature by any of the undersigned shall be sufficient evidence of execution by such person and the original signed document shall be delivered to us within two (2) business days, provided, however, that the absence of such original signed document shall not impair or limit our right to enforcement of the document or repayment of any amounts due to us.

If approved, your loan account will be subject to an applicable credit agreement (the "Agreement") and Promissory Note that governs the terms and conditions of the loan or line of credit granted to you. We will ask you to review, execute and deliver the Agreement to us as a condition to your obtaining the loan or line of credit.

If this Application is for a credit increase on your line of credit, and we approve your request, an Approval Letter will be furnished to you. By continuing to use the line of credit, you agree that all terms and conditions set forth in the original Agreement will remain in effect, except for those terms and conditions specifically addressed in the Approval Letter.

Notice of Negative Information. We may report information about your loan and/or line of credit account(s) to credit bureaus. Late payments, missed payments, and other defaults on your loan and/or line of credit account(s) may be reflected in your credit report.

<u>Patriot Act Notice</u>. Federal law requires us to obtain, verify, and record information that identifies each person establishing an account (loan or deposit) relationship with us. In the course of processing this Application, we have and may, in the future, 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. You agree to comply with all such requests.

AUTHORIZATION	PRIMARY APPLICANT CO-APPLICANT / TRUSTEE	
NAME		
SIGNATURE		
DATE		

## **Consumer Credit Application**

* BANK USE ONLY *						
CIP INFORMATION Complete ONE CIP Section Below.						
☐ CIP INFORMATION – NEW Customer		PRIMARY APPLICANT		CO-APPLICANT / TRUSTEE		
ID Type:						
ID Number:						
ID State or Country of Issuance	2:					
ID Issuance Date & Expiration Date:						
☐ CIP EXCEPTION – EXISTING Customer						
If this section is completed, I certify that <b>valid unexpired</b> identification documents (valid unexpired Primary ID, including issuance and expiration information) are available in the specific location indicated (check one):						
☐ Existing HVC ☐ Existing Excep	otional 🗆 (	Customer's credit file 🛚 Fiserv	WEST03 Database 🗆	OnBase / INFO-ACCESS 🛚	Other:	
APPLICATION ORIGIN  Date Application Received:			Dro	mation Code:		
Date Application Received:		Promotion Code:				
Application Received By:		☐ Branch / Department ☐ Telephone		nnch / Department #:	mont #	
Branch / Department Name:				· · · · · · · · · · · · · · · · · · ·		
Employee Name: Employee Initials:						
REFERRAL INFORMATION						
Referred By Employee Name:				mployee Number:		
Opened By Employee Name:		Employee Number:				
PV POWER or SPLIT A/C SOLAR V	WATER HE	ATING LOANS				
Solar Company Name						
Purchase Agreement / Proposal #:						
Purchase Amount:						
COLLATERAL LOAN REQUESTS (Minimum Loan Amount: \$1,500   Maximum Loan Amount: \$100,000 Consumer)						
**NOTE: Eligible deposit product codes	<mark>s: 240, 720-7</mark>	<sup>7</sup> 28 & 730-731, 750-758, and 231.				
Repayment:	Loan Ter	Loan Term (1-5 years):				
	☐ Refinance existing Loan #:					
Disburse proceeds as follows:	☐ Issue check to Applicant(s) named above.					
	☐ Deposit to CPB Checking / Savings Account #:					
	Account Title / Description:					
Collateral:				LTV (max. 95%):		
		rest Rate: % + 3.50 % = _				
Interest Rate:				/0 APN	DATE	
BANK SIGNATURES	NAME		SIGNATURE		DATE	
Submitted By:						
Approved By:						

APPLICATION SUBMISSION Collateral Loans MUST Be Inputted to CSM.

Email complete applications to: Consumer Apps – GRP (<a href="mailto:consumer.apps@cpb.bank">consumer.apps@cpb.bank</a>). For collateral loans, if an employee submitting a request has insufficient Retail Credit Authority, then the application to be completed & approved by their Branch Manager / individual with authority.