



APPLICATION CHECKLIST

Please include the items listed below to apply for a real estate mortgage.
Please print and complete this Checklist, the attached Pre-Approval Application and Financial Statement.

- _____ Provide Copy of Most Recent 2-Years of Income Tax Returns
- _____ Provide Copy of Driver's License or Picture Identification
- _____ Provide a Written Summary of Your Loan Request
(Amount of Loan, Description of Loan Purpose,
How Will the Loan be Repaid?)
- _____ Provide Signed Copy of the Purchase Agreement (if applicable)

Complete the following information regarding the property that you own or intend to purchase.

Property Address: _____

Type of Property: _____ Single Family Dwelling
_____ Mobile Home With Land
_____ Land
_____ Commercial
_____ Other: _____

(Refinances Only)

Date Acquired: _____

Original Price: _____

Balance Due: _____

Return Completed Application, Checklist, and Checklist Items to:

Mail: First Western Federal Savings Bank
PO Box 1435
Rapid City, SD 57709-1435

Fax: 1-605-394-0084

If you have questions?

Phone: 1-800-908-8845 or 1-605-341-1203

Jeff Fullerton or Roger St. Pierre



TO

TYPE OF CREDIT - CHECK THE APPROPRIATE BOX (Name of Lender)

Individual - If you check this box, provide Financial Information only about yourself.

Joint, with Relationship If you check this box, provide Financial Information about yourself and the other person.

PERSONAL FINANCIAL STATEMENT OF

NOTE: Any willful misrepresentation could result in a violation of Federal Law (Sec. 18 U.S.C. 1014)

Name Birth Date Statement Date Address City State/Zip Social Sec. No. Home Phone No. of Dependents Bus. or Occupation Bus. Phone

NOTE: Complete all of Section II BEFORE Section I

SECTION I

Table with columns for ASSETS and LIABILITIES, including rows for Cash, Securities, Real Estate, and Total Assets/Net Worth.

Table comparing ANNUAL INCOME and ESTIMATE OF ANNUAL EXPENSES, including categories like Salary, Taxes, Insurance, and Mortgage Payments.

Table with columns for GENERAL INFORMATION and CONTINGENT LIABILITIES, including questions about pledged assets and legal actions.

SECTION II

A CASH IN BANKS AND NOTES DUE TO BANKS

(List all Real Estate Loans in Section II-E)

Table for listing bank accounts and notes due to banks, with columns for Name of Bank, Type of Account, and Amounts.

(Complete Rest of Section II on Reverse Side)

(Enter Sec. 1 Line 1) (Enter Sec. 1 Line 21)

FIRST WESTERN FEDERAL SAVINGS BANK

LOAN APPLICATION

DATE OF APPLICATION: _____ MORTGAGE AMOUNT (if known): \$ _____

PURPOSE OF LOAN: PURCHASE CONSTRUCTION REFINANCE

HOME WILL BE: PRIMARY RESIDENCE SECONDARY RESIDENCE NON-OWNER OCCUPIED (INVESTMENT)

INFORMATION REGARDING APPLICANT

FULL NAME (first, middle, last)		DATE OF BIRTH (mo, day, yr)	SOCIAL SECURITY NUMBER	
STREET ADDRESS		CITY	STATE	ZIP TIME AT ADDRESS (yrs/mo)
MAILING ADDRESS (if different than street address)		HOME PHONE <input type="checkbox"/> Listed <input type="checkbox"/> Unlisted ()	BUSINESS PHONE ()	
MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)		# OF DEPENDENTS:	AGES:	
HOME (check one) <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other (explain)				
PREVIOUS STREET ADDRESS		CITY	STATE	ZIP TIME AT ADDRESS (yrs/mo)
CURRENT EMPLOYER		POSITION	MONTHLY GROSS INCOME	
CITY	STATE	ZIP	HOW LONG WITH EMPLOYER (yrs/mo)	

INFORMATION REGARDING CO-APPLICANT OR OTHER PARTY

FULL NAME (first, middle, last)		DATE OF BIRTH (mo, day, yr)	SOCIAL SECURITY NUMBER	
STREET ADDRESS		CITY	STATE	ZIP TIME AT ADDRESS (yrs/mo)
MAILING ADDRESS (if different than street address)		HOME PHONE <input type="checkbox"/> Listed <input type="checkbox"/> Unlisted ()	BUSINESS PHONE ()	
MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)		# OF DEPENDENTS (not listed by applicant):	AGES:	
HOME (check one) <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other (explain)				
PREVIOUS STREET ADDRESS		CITY	STATE	ZIP TIME AT ADDRESS (yrs/mo)
CURRENT EMPLOYER		POSITION	MONTHLY GROSS INCOME	
CITY	STATE	ZIP	HOW LONG WITH EMPLOYER (yrs/mo)	

ADDITIONAL INCOME Do not reveal alimony, child support or separate maintenance income unless you wish it to be considered as a basis for repayment.

NATURE OF ADDITIONAL INCOME	MONTHLY AMOUNT	HOW LONG WILL INCOME CONTINUE?
APPLICANT:	\$	
CO-APPLICANT:	\$	

ASSET INFORMATION (APPLICANT AND CO-APPLICANT)

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

CREDIT OBLIGATIONS Charge accounts, installment contracts, credit cards, rent, mortgage and other obligations. Use separate sheet if necessary.

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH ACCOUNT CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PYMT
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE		(OMIT RENT) \$	(OMIT RENT) \$	\$
OTHER CREDIT OBLIGATIONS (list)			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
TOTAL CREDIT OBLIGATIONS				\$	\$

Are you obligated to make alimony, support or maintenance payments? Yes No
 If yes, to (Name & Address:) _____ Amt. per month: \$ _____

STATEMENT OF INDIVIDUAL OR JOINT CREDIT APPLICATION

I/We are applying for credit with **First Western Federal Savings Bank** Check One:

I am applying for individual credit in my own name and I am relying on my own income and assets and not the income or assets of another person as the basis of repayment of the credit requested.

We are applying for joint credit.
 Applicant's Name Printed: _____ Applicant's Signature _____
 Co-Applicant's Name Printed: _____ Co-Applicant's Signature _____

I am applying for individual credit and I am relying on my own income or assets, as well as income from alimony, child support, or separate maintenance, or on the income or assets of another person as the basis of repayment of the credit requested.

ACKNOWLEDGEMENT AND AGREEMENT

I/We certify that the information provided in this application and on any attachments is true and correct as of the date of this pre-application. Verification may be obtained from any source named in the pre-application and from a credit reporting agency.

X _____ X _____
 APPLICANT SIGNATURE DATE CO-APPLICANT SIGNATURE DATE

OPTIONAL 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.)

<p>APPLICANT <input type="checkbox"/> I do not wish to furnish this information.</p> <p>Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino</p> <p>Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White</p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p>	<p>CO-APPLICANT <input type="checkbox"/> I do not wish to furnish this information.</p> <p>Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino</p> <p>Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White</p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p>
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TO BE COMPLETED BY INTERVIEWER

<p>This application was taken by:</p> <input type="checkbox"/> Face-to-face Interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet	Interviewer's Name (print or type)	Name and Address of Interviewer's Employer First Western Federal Savings Bank 402 Main Street Rapid City, SD 57701
	Interviewer's Signature _____ Date _____	
	Interviewer's Phone Number (incl. area code)	