

SMART LOAN*

First State Bank of the Florida Keys provides qualified Waste Water District customers with Loans for the required sewer Hook Up...

- ✓ Easy Application
- ✓ 48 Hour Approval
- ✓ Fast Processing
- ✓ 10 Year Financing
- ✓ Fixed Rates
- ✓ FSB Auto Pay
- ✓ Online Banking
- ✓ Local Lending
- ✓ Locally owned & operated
- ✓ 50+ Years in the Keys

* Subject to Credit Approval & Property Evaluation.
Not all borrowers will qualify for a loan.

Quality Banking & Old Fashioned Service

- ✓ #1 Local Lender
 - Residential
 - Commercial
 - Equity
- ✓ FREE Checking
- ✓ FREE Online Banking & Bill Pay
- ✓ FREE Credit Cards
- ✓ High Yield Savings
- ✓ Business Banking
- ✓ Open Evenings & Saturdays
- ✓ Voted Best Bank & Best Business

Call for a FREE "Hook Up" Evaluation Today!

Call, Click or Visit...

Key Largo Branch
97670 Overseas Hwy.
305-852-2070

KeysBank.com

Se Habla Español

HOOK UP...

Smart Loans for
Waste Water
District Customers



Equal Housing Lender Member FDIC 06/08

SMART CREDIT APPLICATION

TYPE OF CREDIT REQUEST				FOR CREDITOR USE	
IMPORTANT: Check (✓) the appropriate boxes below and complete the applicable sections.					
<input type="checkbox"/> SECURED		<input type="checkbox"/> INDIVIDUAL CREDIT – relying solely on my income or assets		DATE _____ CLASS NO. _____	
<input type="checkbox"/> UNSECURED		<input type="checkbox"/> INDIVIDUAL CREDIT – relying on my income or assets as well as income or assets from other sources		ACCOUNT NO. _____	
		<input type="checkbox"/> JOINT CREDIT		APPROVED <input type="checkbox"/> BY _____	
				DECLINED <input type="checkbox"/> BY _____	
AMOUNT REQUESTED	FOR HOW LONG	PAYMENT DATE DESIRED	WANT TO REPAY	PROCEEDS OF LOAN TO BE USED FOR:	
\$ _____			<input type="checkbox"/> MONTHLY <input type="checkbox"/> _____		

SECTION A – INDIVIDUAL APPLICANT INFORMATION

NAME (Last, First, Middle)					
BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS
ADDRESS (Street, City, State & Zip)			COUNTY	Do you <input type="checkbox"/> Own or <input type="checkbox"/> Rent	HOW LONG
EMPLOYER (Company Name & Address)					HOW LONG
BUSINESS PHONE	Ext.	POSITION OR TITLE		SALARY PER MONTH	
SOURCES OF OTHER INCOME				GROSS: \$ _____	NET: \$ _____
				AMOUNT PER MONTH \$ _____	

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.

NAME (Last, First, Middle)					
BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	NO. DEPENDENTS	AGES OF DEPENDENTS
RELATIONSHIP TO APPLICANT (If any)			ADDRESS (Street, City, State & Zip)		HOW LONG
EMPLOYER (Company Name & Address)					HOW LONG
BUSINESS PHONE	Ext.	POSITION OR TITLE		SALARY PER MONTH	
SOURCES OF OTHER INCOME				GROSS: \$ _____	NET: \$ _____
				AMOUNT PER MONTH \$ _____	

SECTION C – MARITAL STATUS

Complete only if, for joint or secured credit, or applicant resides in a community property state, or is relying on property located in such a state as basis for repayment of the credit requested.

APPLICANT	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced, and widowed)
OTHER PARTY	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (including single, divorced, and widowed)

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) (where)			\$ _____
SAVINGS ACCOUNT NUMBER(S), CD's, SECURITIES (where)			
REAL ESTATE (location, date acquired)			
LIFE INSURANCE (issuer, face value)			
AUTOMOBILES (make, model, year)			
OTHER (list)			
TOTAL ASSETS			\$ _____

OUTSTANDING DEBTS (Including 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 (OMIT RENT)	PRESENT BALANCE (OMIT RENT)	MONTHLY PAYMENTS
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$ _____	\$ _____	\$ _____
AUTOMOBILES (describe)					
TOTAL DEBTS			\$ _____	\$ _____	\$ _____

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? No Yes
 If yes, to (Name & Address) _____ Amt. per month \$ _____

Are you a co-maker, endorser, or guarantor on any loan or contract? No Yes If yes, for whom? _____ To whom? _____

Are there any unsatisfied judgments against you? No Yes If yes, to whom owed? _____ Amount \$ _____

Have you been declared bankrupt in the last 10 years? No Yes If yes, where? _____ Year? _____

SECTION E - SECURED CREDIT

Complete only if credit is to be secured. Briefly describe the property to be given as security:

PROPERTY DESCRIPTION _____

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY _____

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (if any). _____

SIGNATURES I certify that everything I have stated in this application and on any 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 _____