

WHO PROVIDES YOUR PROFESSIONAL SERVICES?

	Name	City / State	Telephone
Accountant			
Attorney			
Business Insurance			

This information and the information provided on all accompanying financial statements and schedules is provided for the purpose of obtaining credit for the Applicant(s) or for the purpose of Applicant(s) and/or individuals (Guarantor(s)) guaranteeing credit for others and I/we further agree that the Bank may, from time to time, request consumer credit reports containing credit and other information about me/us from third parties, such as credit bureaus and trade references. Applicant(s) acknowledge that representations made in this statement will be relied on by Savers Co-operative Bank herein named "Creditor" in its decision to grant such credit. This Statement is true and correct in every detail and accurately represents the financial condition of the Applicant(s) on the date below. Creditor is authorized to make all inquiries it deems necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the Applicant(s) and/or Guarantor(s). Applicant(s) will promptly notify Creditor of any subsequent changes, which would affect the accuracy of this Statement. Creditor is further authorized to answer any questions about Creditor's credit experience with Applicant(s). Applicant(s) are aware that any knowing or willful false statements regarding the value of the above property for purposes of influencing the actions of Creditor can be a violation of federal law, 18 U.S.C. § 1014, and may result in a fine or imprisonment or both.

We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

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 you 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.

By signing below, each applicant declares that he/she has read and understands the statement above.

Applicant/Company Name:		Co-Applicant/Company Name:	
Authorized Signature		Authorized Signature	
Date		Date	

EQUAL CREDIT OPPORTUNITY NOTICE

Were your gross revenues \$1,000,000 or less in your previous fiscal year?		<p>NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract): because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act, the federal agency that administers compliance with this law concerning this creditor is:</p> <p>DIVISION OF DEPOSITOR AND CONSUMER PROTECTION National Center for Consumer and Depositor Assistance, Federal Deposit Insurance Corporation 1100 Walnut St, Box #11 Kansas City, Missouri 64106</p>
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p>If you answered "yes" and the Creditor denies your application for credit, you have the right to a written statement of the specific reasons for the denial. Within 60 days from the date you are notified of Creditor's decision you may obtain a copy of the statement by contacting:</p> <p>Savers Bank Attn: Commercial Lending Department 270 Main Street / P. O. Box 250 Southbridge, MA 01550</p> <p>The Creditor will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The notice at right describes additional protections extended to you.</p>		

DISCLOSURE OF RIGHT TO RECEIVE A COPY OF APPRAISALS

We may order an appraisal to determine the value of the collateral property listed above and charge you for this appraisal. If this appraisal is related to a one to four family residential property, we will promptly provide you with a copy of any valuation, even if your loan does not close.

You may also pay for an additional appraisal for your own use at your cost.

By signing below, I / we acknowledge that I / we have read and received a copy of this document.

Authorized Signature	Date	Authorized Signature	Date

To be completed by interviewer. This application was taken by:

Name (Print or type)		Employer Savers Bank 270 Main Street / P.O. Box 250 Southbridge, MA 01550
Signature		
Phone Number		

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." **The law provides that we may not discriminate on the basis of this information**, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

Borrower:		Co-Borrower:	
Ethnicity (Check one or more) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino		Ethnicity (Check one or more) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino	
Other Hispanic/Latino:		Other Hispanic/Latino:	
<input type="checkbox"/> I do not wish to furnish this information		<input type="checkbox"/> I do not wish to furnish this information	

Race (Check one or more) <input type="checkbox"/> American Indian/Alaskan Native Name of Principal Tribe:	<input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese	<input type="checkbox"/> Other Asian:	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan	<input type="checkbox"/> Other Pacific Islander:	<input type="checkbox"/> White	<input type="checkbox"/> I do not wish to furnish this information
Race (Check one or more) <input type="checkbox"/> American Indian/Alaskan Native Name of Principal Tribe:	<input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese	<input type="checkbox"/> Other Asian:	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan	<input type="checkbox"/> Other Pacific Islander:	<input type="checkbox"/> White	<input type="checkbox"/> I do not wish to furnish this information

Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information

For Bank Use Only

Application Method	<input type="checkbox"/> Face to face interview	<input type="checkbox"/> By mail	<input type="checkbox"/> By telephone	<input type="checkbox"/> Email/Internet			
Basis for Information Collection (Visual Observation or Surname)		Ethnicity		Sex		Race	
	Borrower	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Co-Borrower	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No