



CREDIT APPLICATION

IMPORTANT: Please read these directions before completing this Application, and check (✓) the appropriate box below.

- Application instructions regarding individual credit, joint credit, and income sources.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT
To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

AMOUNT REQUESTED, PAYMENT DATE DESIRED, PROCEEDS OF CREDIT TO BE USED FOR

SECTION A - INFORMATION REGARDING APPLICANT

FULL NAME (Last, First Middle), BIRTH DATE, HOME PHONE, CELL PHONE, BUSINESS PHONE, Ext.

Are you a member of the armed forces who is serving on active duty or on active Guard or Reserve duty?

ARE YOU A U.S. PERSON? DRIVERS LICENSE NO., STATE, DATE OF ISSUANCE, DATE OF EXPIRATION, SOCIAL SECURITY NO. or TAX I.D NO.

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box, City, State, & Zip) or; IF MILITARY, APO OR FPO ADDRESS or; IF N/A, NEXT OF KIN OR FRIEND

PREVIOUS ADDRESS (Street, City, State, & Zip), HOW LONG AT PREVIOUS ADDRESS?, EMAIL ADDRESS

PRESENT EMPLOYER (Company Name & Address), OCCUPATION, POSITION OR TITLE, HOW LONG WITH PRESENT EMPLOYER?, NAME OF SUPERVISOR

PREVIOUS EMPLOYER (Company Name & Address), HOW LONG WITH PREVIOUS EMPLOYER?

YOUR PRESENT GROSS SALARY OR COMMISSION, YOUR PRESENT NET SALARY OR COMMISSION, NO. DEPENDENTS, AGES OF DEPENDENTS

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.

OTHER INCOME, SOURCES OF OTHER INCOME, Have you ever received credit from us?

Is any income listed in this Section likely to be reduced before the credit requested is paid off? Checking Acct. No., Savings Acct. No., Where?

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU, RELATIONSHIP, TELEPHONE NO. (Include Area Code)

SECTION B - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheets if necessary.)

FULL NAME (Last, First, Middle), RELATIONSHIP TO APPLICANT (If Any), BIRTH DATE, HOME PHONE, CELL PHONE, BUSINESS PHONE, Ext.

Are you a member of the armed forces who is serving on active duty or on active Guard or Reserve duty?

ARE YOU A U.S. PERSON? DRIVERS LICENSE NO., STATE, DATE OF ISSUANCE, DATE OF EXPIRATION, SOCIAL SECURITY NO. or TAX I.D NO.

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box, City, State, & Zip) or; IF MILITARY, APO OR FPO ADDRESS or; IF N/A, NEXT OF KIN OR FRIEND

PRESENT EMPLOYER (Company Name & Address), OCCUPATION, POSITION OR TITLE, HOW LONG WITH PRESENT EMPLOYER?, NAME OF SUPERVISOR

PREVIOUS EMPLOYER (Company Name & Address), HOW LONG WITH PREVIOUS EMPLOYER?, EMAIL ADDRESS

YOUR PRESENT GROSS SALARY OR COMMISSION, YOUR PRESENT NET SALARY OR COMMISSION, NO. DEPENDENTS, AGES OF DEPENDENTS

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.

OTHER INCOME, SOURCES OF OTHER INCOME, Has Joint Applicant or Other Party ever received credit from us?

Is any income listed in this Section likely to be reduced before the credit requested is paid off? Checking Account No., Savings Account No., Where?

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU, RELATIONSHIP, TELEPHONE NO. (Include Area Code)

SECTION C - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)

APPLICANT, OTHER PARTY, Married, Separated, Unmarried (Including single, divorced, or 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	VALUE	SUBJECT TO DEBT? Yes / No	NAMES OF OWNERS
CASH	\$		
AUTOMOBILES (Make, Model, Year)			
1. ....			
2. ....			
3. ....			
CASH VALUE OF LIFE INSURANCE (Issuer, Face Value)			
REAL ESTATE (Location, Date Acquired)			
MARKETABLE SECURITIES (Issuer, Type, No. of Shares)			
OTHER (List)			
<b>TOTAL ASSETS</b>	<b>\$ 0.00</b>		

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary)

CREDITOR	TYPE OF DEBT OR ACCOUNT NUMBER	NAME IN WHICH ACCOUNT IS CARRIED	ORIGINAL DEBT (Omit Rent)	PRESENT BALANCE (Omit Rent)	MONTHLY PAYMENTS	PAST DUE? Yes / No
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage		\$	\$	\$	
<b>TOTAL DEBTS</b>			<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	

CREDIT REFERENCES (Paid off Accounts)	DATE PAID OFF
\$	

MY AUTO INSURANCE AGENT IS: (Name & Address)

Are you the co-maker, endorser, or guarantor on any loan or contract?  No  Yes - For Whom? \_\_\_\_\_ To Whom?

Are there any unsatisfied judgments against you?  No  Yes - Amount \$ \_\_\_\_\_ If "Yes", To Whom Owed? \_\_\_\_\_

Have you been declared bankrupt in the last 10 years?  No  Yes - Where? \_\_\_\_\_ Year? \_\_\_\_\_

OTHER OBLIGATIONS (For example, liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)

**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):

**CREDIT DISCLOSURES:** An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

**SIGNATURES**

Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and answer questions about your credit experience with me.

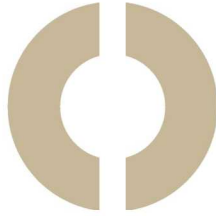
APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Unless I have purchased the insurance product(s) by mail or if the Credit Disclosures are provided electronically, by signing below, I acknowledge that I have received the Credit Disclosures orally at the time I have applied for credit and fully understand the disclosures noted above. I am also being provided with a copy of these disclosures and I acknowledge receipt by my signature. OTHER SIGNATURE (Where Applicable) \_\_\_\_\_ DATE \_\_\_\_\_

Save Form

Print Form

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# CROSSFIRST BANK®

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• 9451 E. 13th Street N. • Wichita, KS 67206 • Main: 316-925-4800

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**DES MOINES** • 680 Broadway Avenue • Des Moines, NM 88418 • Main: 575-278-2861

**CLAYTON** • 22 Maple Street • PO Box 488 • Clayton, NM 88415 • Main: 575-374-8301

**ROY** • 405 Chicosa Street • Roy, NM 87743 • Main: 575-485-2263

## FEDERAL CONSUMER CREDIT DISCLOSURES

**CREDIT DISCLOSURES:** An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

## INSTRUCTIONS

*After completing and signing this application please mail or deliver to one of our locations listed above.*

*If you need assistance in completing this application  
please feel free to call us at one of the phone numbers listed above.*

*We sincerely appreciate the opportunity to serve you.*

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