



Home Equity Line of Credit Application

10-year interest only draw period/10-year principal and interest repayment period

PRINT this form, COMPLETE it, then DROP IT OFF at any of our Illinois branches OR MAIL it to: Evergreen Bank Group, 1515 W. 22nd St, Suite 100W, Oak Brook, IL 60523. Please remember to review Details, Terms and Conditions at www.EvergreenBankGroup.com.

Type of Account Requested

- INDIVIDUAL (Own income or assets) Complete Sections A, C, D, E and F.
- JOINT (Each borrower intends to apply for joint credit. Please initial here.) _____ Complete All Sections.

Loan Amount and Purpose

| | | |
|------------------|--------------------------------|--|
| Amount Requested | How will you use the proceeds? | How did you hear about Evergreen Bank Group? |
|------------------|--------------------------------|--|

A. Individual Applicant Information

| | | | | |
|--|---------------------------|-----------------------|--|--|
| Full Name | Social Security Number | Date of Birth | Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated | |
| Principal Residence Street Address, City, State, Zip | | Years at this Address | E-mail Address | |
| Years at this address? | Do you own this property? | Number of Dependents | Cell Phone | Previous Address (if at current address less than 2 years) |
| Driver's License Number and State | Issue Date | Exp Date | Home Phone | Years at this Address |
| Current Employer | Position or Title | Work Phone | Years There | Occupation |
| Employer's Address | | | Gross Salary <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year | |
| Previous Employer (if at job less than 2 yrs) | Position or Title | Work Phone | Years There | Occupation |
| *Alimony, Child Support, Separate Maintenance Income or other income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If you choose to include as a source of income, please provide information on the person providing the assets in Section B or attach as a separate document. | | | Source of Other Income* | |

B. Co-Applicant Information

| | | | | |
|--|---------------------------|-----------------------|--|--|
| Full Name | Social Security Number | Date of Birth | Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated | |
| Principal Residence Street Address, City, State, Zip | | Years at this Address | E-mail Address | |
| Years at this address? | Do you own this property? | Number of Dependents | Cell Phone | Previous Address (if at current address less than 2 years) |
| Driver's License Number and State | Issue Date | Exp Date | Home Phone | Years at this Address |
| Current Employer | Position or Title | Work Phone | Years There | Occupation |
| Employer's Address | | | Gross Salary <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year | |
| Previous Employer (if at job less than 2 yrs) | Position or Title | Work Phone | Years There | Occupation |
| *Alimony, Child Support, Separate Maintenance Income or other income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If you choose to include as a source of income, please provide information on the person providing the assets in Section B or attach as a separate document. | | | Source of Other Income* | |



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C. Collateral Property

| | | | | |
|--|---|---|-------------------|----------------------|
| Present Market Value | Type <input type="checkbox"/> Single Family (1 - 2 units) <input type="checkbox"/> Condo/Townhome | <input type="checkbox"/> Primary residence <input type="checkbox"/> Other | Name on Title | |
| Property Street Address, City, State, Zip (if different) | Year Built | Year Purchased | Purchase Price | Cost of Improvements |
| Current Outstanding Balance | Current Interest Rate | | Mortgage Maturity | |

D. Assets and Liabilities Summary

| Assets | | Liabilities | |
|---|-----------------|--------------------------|-----------------|
| Cash and deposits in financial institutions | \$ _____ | Real estate loans | \$ _____ |
| Vested interest in retirement plans | \$ _____ | Installment loans | \$ _____ |
| Brokerage accounts | \$ _____ | Credit card debt | \$ _____ |
| Real estate owned | \$ _____ | Other liabilities | \$ _____ |
| Other assets | \$ _____ | | |
| Total Assets | \$ _____ | Total Liabilities | \$ _____ |
| Less Total Liabilities | \$ _____ | | |
| Equals Net Worth | \$ _____ | | |

E. Credit Information

| | | | |
|-----------------|--------------------------|------------------------|-------------------|
| Mortgage Holder | Monthly Mortgage Payment | Annual Real Estate Tax | Escrow for taxes? |
|-----------------|--------------------------|------------------------|-------------------|

F. Declarations

| Declaration | Applicant | Co-Applicant |
|--|--|--|
| Have you had property foreclosed upon or given title or deed in lieu thereof? If yes, what year? _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you obligated to pay alimony, child support or separate maintenance? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you party to any lawsuit or subject to outstanding judgments? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you have past due taxes or credit obligations? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever filed for personal bankruptcy? If yes, what year? _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are there any judgments or legal proceedings against you? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you a U.S. citizen or permanent resident alien? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

The undersigned certify(ies) that the information provided herein and any schedules attached hereto have been carefully read by the undersigned and the information contained herein and attached hereto is true and correct. Authorization: NOTICE 18 United States Code 1014, prescribes criminal penalties for false statements in loan application to federally insured banks. I/WE hereby certify that the foregoing statements are true and complete and are made for the purpose of determining my/our eligibility for credit. I/WE agree that this statement shall remain your property, whether or not the application is accepted. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness, including, but not limited to procuring consumer reports from consumer reporting agencies and credit information from banks and other financial institutions and extenders of credit references, present and former employers, merchants, landlords and creditors. Each applicant consents that, upon denial of the application based upon a consumer report or information received from a person other than a consumer reporting agency or any applicant, creditor may make appropriate Fair Credit Reporting Act disclosures to all applicants.

Applicant's Signature _____ Date Signed _____

Co-Applicant's Signature _____ Date Signed _____

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 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.

Evergreen Bank Group Branch Locations

Oak Brook
1515 W. 22nd St, Suite 100W
Oak Brook, IL 60523
(630) 413-9580

Evergreen Park
3842 W. 95th Street
Evergreen Park, IL 60805
(708) 229-1010

Hinsdale
1 Grant Square, Suite 100
Hinsdale, IL 60521
(630) 590-4800



GMI DATA COLLECTION FORM

Demographic Information of Applicant and Co-Applicant

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, race, and sex) 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, race, and sex on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

| Applicant | Co-Applicant |
|--|--|
| Ethnicity: - Check one or more | Ethnicity: - Check one or more |
| <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino - <i>Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information | <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino - <i>Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on:</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information |
| Race: - Check one or more | Race: - Check one or more |
| <input type="checkbox"/> American Indian or Alaska Native - <i>Print name of enrolled or principal tribe:</i> <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 - <i>Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:</i> <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 - <i>Print race, for example, Fijian, Tongan, and so on:</i> <input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information | <input type="checkbox"/> American Indian or Alaska Native - <i>Print name of enrolled or principal tribe:</i> <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 - <i>Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:</i> <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 - <i>Print race, for example, Fijian, Tongan, and so on:</i> <input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information |
| Sex: | Sex: |
| <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information | <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information |

To Be Completed by Financial Institution (for an application taken in person)

| | |
|--|---|
| Was the ethnicity of the applicant collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No | Was the ethnicity of the co-applicant collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Was the race of the applicant collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No | Was the race of the co-applicant collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Was the sex of the applicant collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No | Was the sex of the co-applicant collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No |