Life Insurance Line Of Credit Application

DIFFERENT APPROACH, BETTER RESULTS®

LAKE FOREST BANK & TRUST COMPANY, N.A.®
A WINTRUST COMMUNITY BANK

Return completed form to one of our offices, or mail it to:

Lake Forest Bank & Trust Company, N.A.
780 N. Bank Ln.
Lake Forest, IL 60045

IMPORTANT: Before submitting this application, please attach a copy of your most recent insurance policy statement.

Please check the box that applies (one box must be checked):

❍ I am applying for a loan in my name only and will rely on my own income/assets to repay.

❍ We intend to apply for joint credit.

❍ I am applying for this loan in my name only but will rely on the income or assets of another person to repay.

Loan Purpose

Requested Loan Amount

IMPORTANT INFORMATION ABOUT 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. What this means to you: When you open an account, we will ask for your name, physical address, date of birth, taxpayer identification number, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

If the Applicant is married, he or she may apply for individual credit.

Please check the box that applies:

❍ I am applying for a secured credit

❍ I reside in a community property state

❍ I am relying on property in a community property state as a basis for repayment of the credit requested

APPLICANT

First Name	M.I.	Last Name	
Home Address		City	State/ZIP
❍ Own ❍ Rent		How long there?	
Name of Present Landlord/Mortgage Holder			
Prior Address *(only if present address is less than 2 years)*			
Primary Phone		Secondary Phone	
Email Address			
Social Security No.		Date of Birth	
❍ Married ❍ Separated ❍ Unmarried *(including single, divorced, widowed)*		Are you a party to a civil union entered in IL or similar relationship legally entered in another state? ❍ Yes ❍ No	
U.S. Citizen? ❍ Yes ❍ No		Permanent Resident Alien? ❍ Yes ❍ No	
Driver's License No.	State	Date Issued	Expiration
Other ID *(State, Military, Tribal, etc.)*	State/Agency	Date Issued	Expiration
Employer		How long there?	
Address		Phone	
Type of Business?		Occupation/Title	
Are there any outstanding judgements against you? ❍ Yes ❍ No		Have you ever declared bankruptcy in the last 7 years? ❍ Yes ❍ No	
Explanation and amount if any:		Explanation and amount if any:	

Community property states: AZ, CA, ID, LA, NV, NM, TX, WA, WI

Member FDIC EQUAL HOUSING LENDER

CO-APPLICANT

First Name	M.I.	Last Name

Home Address	City	State/ZIP

❍ Own ❍ Rent	How long there?	Name of Present Landlord/Mortgage Holder

Prior Address *(only if present address is less than 2 years)*

Primary Phone	Secondary Phone

Email Address

Social Security No.	Date of Birth

❍ Married ❍ Separated ❍ Unmarried *(including single, divorced, widowed)*	Are you a party to a civil union entered in IL or similar relationship legally entered in another state? ❍ Yes ❍ No

U.S. Citizen? ❍ Yes ❍ No	Permanent Resident Alien? ❍ Yes ❍ No

Driver's License No.	State	Date Issued	Expiration

Other ID *(State, Military, Tribal, etc.)*	State/Agency	Date Issued	Expiration

Employer	How long there?

Address	Phone

Type of Business?	Occupation/Title

Are there any outstanding judgements against you? ❍ Yes ❍ No	Have you ever declared bankruptcy in the last 7 years? ❍ Yes ❍ No
Explanation and amount if any:	Explanation and amount if any:

APPLICANT INSURANCE POLICY INFORMATION

Insurance Carrier	Premium Payment Frequency? ❍ Monthly ❍ Quarterly ❍ Annually
Whole life policy? ❍ Yes ❍ No	Face Amount of Policy *(Death Benefit)* $
Policy Issue Date	Policy Premium Payment Amount $
Policy Number	Cash Surrender Value *(CSV)* $
Insurance Agent Name	Date of Cash Surrender Value *(CSV)*
Insurance Agent Email	Policy Owner
Insurance Agent Phone	***Please attach most recent insurance policy statement or current insurance policy illustration.***

AGREEMENT: I/We certify that everything stated in this application and on any attachments is true and correct and that by signing below, I/we authorize you to verify insurance policy information with the insurance carrier.

NOTICE: 18 United States Code § 1014, prescribes criminal penalties for false statements in loan application to Federally insured banks. I/We certify that the foregoing statements are true and complete and 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 herein, and to determine my/our credit worthiness, including, but not limited to, procuring consumer credit 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 this application based on consumer report or information received from a person other than a consumer reporting agency on any application, you may disclose the information to all applicants in any notification or report required by Federal laws. We report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit bureau.

NOTICE TO MARRIED WISCONSIN APPLICANTS: No provision of any marital property agreement, unilateral statement under § 766.59, Wis. Stats., or court decree under § 766.70, Wis. Stats., adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement, or decree or has actual knowledge of the adverse provision.

Applicant's Signature Date	Co-Applicant's Signature Date

FOR INTERNAL USE ONLY	Date Application Received	How Application Was Received