



Ready Reserve Overdraft Protection Plan FOR CONSUMER USE ONLY

You may apply for credit in your name alone, regardless of your marital status. However, (1) all owners of the associated checking account must jointly apply, and (2) if you want us to consider anyone else's future earnings, he or she and you must also jointly apply, regardless of your relationship to each other, if any.

You are applying in : Your name, alone
 Your name along with _____

Your marital status is: Married or registered under the California Domestic Partnership Law Separated
 Unmarried (includes single, divorced and widowed - does not include registered domestic partner)

CREDIT LIMITS: \$300 MINIMUM - \$5,000 MAXIMUM - BASED ON CREDIT APPROVAL

\$300

\$500

\$ _____ Additional financial information will be required for amounts over \$500.

I understand that I must have a checking account at the Savings Bank of Mendocino County to be eligible for a Ready Reserve Overdraft Protection Plan. My Savings Bank checking account number is _____.

Would you like your loan payments automatically deducted from your SBMC checking account? Yes No

If you intend to apply for joint credit, please initial here:

Applicant _____

Co-Applicant _____

Applicant	Last Name		First	MI	Birth Date	Social Security #		DMV License or ID #		
	Current Address				City	State	Zip	Issued:	Exp:	
	Mailing Address (if different from above)				City	State	Zip	How long at current address?		
	Home Phone		Cell Phone				Email Address			
	Current Employer				Work Phone Number			How Long		
	Employer's Address				City	State	Zip	Are you self-employed? No Yes		
	Additional Current Employer		Previous Employer (if less than 2 years at current)				If Yes, how many years and months?			
	Employer's Address				City	State	Zip	Name _____		
						Type of Business _____				

Co-Applicant	Last Name		First	MI	Birth Date	Social Security #		DMV License or ID #		
	Current Address				City	State	Zip	Issued:	Exp:	
	Mailing Address (if different from above)				City	State	Zip	How long at current address?		
	Home Phone		Cell Phone				Email Address			
	Current Employer				Work Phone Number			How Long		
	Employer's Address				City	State	Zip	Are you self-employed? No Yes		
	Additional Current Employer		Previous Employer (if less than 2 years at current)				If Yes, how many years and months?			
	Employer's Address				City	State	Zip	Name _____		
						Type of Business _____				

