

Section 1 – Loan Information			
The applicant is applying for this loan: <input type="checkbox"/> INDIVIDUALLY, without a co-applicant or other person or entity. <input type="checkbox"/> JOINTLY, with a person or persons who will also be contractually liable. (Both applicants initial: _____)		If you are a resident of Washington State, or if you are applying for secured credit, please check one: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	
Requested loan amount: \$ _____		Purpose of Loan: _____	
Type of loan you are applying for: <input type="checkbox"/> CD-Secured Loan <input type="checkbox"/> Home Equity Line of Credit (HELOC) <input type="checkbox"/> Personal Line of Credit			
If this is a Home Equity loan request, provide the subject property address: _____			
Will any of the proceeds be used to pay off a loan at another institution? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, which institution? _____		Loan No. _____ Amount owed: \$ _____	
Section 2 – Applicant Information			
Applicant		Co-Applicant	
Name (Last, First, Middle Initial)		Name (Last, First, Middle Initial)	
SS# / TIN	Number of dependents:	SS# / TIN	Number of dependents:
Date of Birth Select Date		Date of Birth Select Date	
		<input type="checkbox"/> Address Same as Applicant	
Physical Address:		Physical Address:	
City	ST	ZIP	
City	ST	ZIP	
How long have you lived at this address? yrs. mos.		How long have you lived at this address? yrs. mos.	
Information on your residence: <input type="checkbox"/> Rent <input type="checkbox"/> Own		Information on your residence: <input type="checkbox"/> Rent <input type="checkbox"/> Own	
Monthly payment: \$ _____		Monthly payment: \$ _____	
(If you own your residence free and clear, indicate "none.")		(If you own your residence free and clear, indicate "none.")	
Mailing Address (if different):		Mailing Address (if different):	
City	ST	ZIP	
City	ST	ZIP	
		<input type="checkbox"/> Home Phone Same as Applicant	
Home Phone:		Home Phone:	
Contact Phone (if different):		Contact Phone (if different):	
Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Previous Address:		Previous Address:	
City	ST	ZIP	
City	ST	ZIP	
How long did you live at this address? yrs. mos.		How long did you live at this address? yrs. mos.	
Section 3 – Employment Information			
Current Employer:		Occupation:	
How long with this employer? yrs. mos.		Work Phone:	
Previous Employer (if less than 2 years with current employer):		Occupation:	
How long with this employer? yrs. mos.		Work Phone:	
What is your gross monthly income? \$ _____		What is your gross monthly income? \$ _____	
NOTE: Income from alimony, child support or separate maintenance need not be revealed if the applicant does not choose to have it considered as a basis for repaying this loan.			
Section 4 – Automatic Payment Deduction (please select one)			
<input type="checkbox"/> I request and authorize First Financial Northwest Bank (FFNWB) to deduct my loan payments in full each month from the following FFNWB checking/savings account, Acct. No. _____, on the payment due date. (Please attach a voided check in order to provide verification of account number.)			
<input type="checkbox"/> I request and authorize First Financial Northwest Bank (FFNWB) to deduct my loan payments in full each month from the following NON-FFNWB checking/savings account, Acct. No. _____, with (bank name) _____, on the payment due date. (Please attach a voided check in order to provide verification of account number.)			
<input type="checkbox"/> I do not want automatic payment deduction. Please send me a monthly bill.			

Section 5 – Assets											
Applicant's Liquid Accounts					Co-Applicant's Liquid Accounts						
Asset Description	Financial Institution		Value		Asset Description	Financial Institution		Value			
Checking Acct. No.			\$		Checking Acct. No.			\$			
Checking Acct. No.			\$		Checking Acct. No.			\$			
Savings Acct. No.			\$		Savings Acct. No.			\$			
Savings Acct. No.			\$		Savings Acct. No.			\$			
Certificate of Deposit No.			\$		Certificate of Deposit No.			\$			
Other:			\$		Other:			\$			
Applicant's Semi-Liquid Accounts					Co-Applicant's Semi-Liquid Accounts						
Marketable Stocks and Bonds:			Value: \$		Marketable Stocks and Bonds:			Value: \$			
			Value: \$					Value: \$			
Insurance (cash value):			Value: \$		Insurance (cash value):			Value: \$			
IRA, 401(k):			Value: \$		IRA, 401(k):			Value: \$			
Keogh, Pension Plan(s):			Value: \$		Keogh, Pension Plan(s):			Value: \$			
Other:			Value: \$		Other:			Value: \$			
Other:			Value: \$		Other:			Value: \$			
Applicant's Personal Property					Co-Applicant's Personal Property						
Automobile	Make	Model	Year	Value	Automobile	Make	Model	Year	Value		
				\$					\$		
				\$					\$		
Other Property:			Value: \$		Other Property:			Value: \$			
Other Property:			Value: \$		Other Property:			Value: \$			
TOTAL PERSONAL ASSETS:				\$	TOTAL PERSONAL ASSETS:				\$		
Section 6 – Liabilities											
Type	Creditor	Acct. No.	Balance	Monthly Payment	Type	Creditor	Acct. No.	Balance	Monthly Payment		
Auto Loan #1			\$	\$	Auto Loan #1			\$	\$		
Auto Loan #2			\$	\$	Auto Loan #2			\$	\$		
Credit Card #1			\$	\$	Credit Card #1			\$	\$		
Credit Card #2			\$	\$	Credit Card #2			\$	\$		
Real Estate Residence (total)			\$	\$	Real Estate Residence (total)			\$	\$		
Real Estate Rentals (total)			\$	\$	Real Estate Rentals (total)			\$	\$		
			\$	\$				\$	\$		
Please list any other obligations (e.g., liability to pay alimony, child support) below.											
Liability	Amount	Other Information			Liability	Amount	Other Information				
	\$					\$					
	\$					\$					
TOTAL LIABILITIES:					\$	TOTAL LIABILITIES:					\$

Section 7 – Other Liabilities						
Has the Applicant or Co-Applicant been declared bankrupt in the last 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where? Year: Comments:						
Are there any unsatisfied judgments against the Applicant or Co-Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, to whom? Amount: \$ Comments:						
Is the Applicant or Co-Applicant a co-maker, endorser or guarantor on any other loan or contract? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, for whom? Amount: \$ Comments:						
Other Income: \$ Source?			Other Income: \$ Source?			
Other Income: \$ Source?			Other Income: \$ Source?			
Other Income: \$ Source?			Other Income: \$ Source?			
Section 8 – Schedule of Real Estate Owned						
Applicant/Co-Applicant – If more than 2 properties, attach the full-page form Schedule of Real Estate Owned.						
Address of Real Estate (If the real estate is pending, enter PS in the next column.)	Present Market Value	Amount of Mortgage/Lien:	Gross Income If Property Is Rental	Mortgage Payment and Frequency	Taxes, Insurance, Maintenance and Misc. Expenses	Net Rental Income
	\$	\$	\$	\$ /	\$	\$
	\$	\$	\$	\$ /	\$	\$
Totals:	\$	\$	\$	\$ /	\$	\$
Section 9 – USA PATRIOT Act Notice						
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.						
Section 10 – ECOA 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 (provided the applicant has the capacity to enter into a binding contract); because all of part of the applicant' 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 the FDIC Consumer Response Center, 1100 Walnut Street, Box #11, Kansas City, MO 64106						
Section 11 – Fair Credit Reporting Act Notice						
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.						
Section 12 – Your Right to a Copy of Your Appraisal or Written Valuation(s)						
We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal or other written valuation, even if your loan does not close.						
You can pay for an additional appraisal for your own use at your own cost.						
You will be provided a copy of each appraisal or written valuation developed in connection with this application for credit promptly upon completion, or three (3) business days prior to the time you become contractually obligated on the transaction (for 1 st lien closed-end credit) or account opening (for 1 st lien open-end credit), whichever is earlier.						

Section 13 – Agreements

I (we) hereby affirm that Applicant(s) has answered all of the questions on this Application fully and truthfully, and the information provided is accurate as of the date provided below unless otherwise noted. Applicant(s) hereby affirms that the information contained in this Application Agreement, including the information on any accompanying pages is true, complete, and correct and that Lender is relying on this information if it makes the requested loan. Lender is authorized to make any investigation of Applicant's credit and/or employment status, either directly or through any agency employed by Lender, including obtaining a credit report from a Credit Reporting Agency. Lender may disclose to any other interested parties Lender's experience with Applicant's credit account. Lender may keep this Application Agreement even if Lender decides not to make the credit to Applicant.

Home Equity Line of Credit: If I (we) are applying for a Home Equity Line of Credit, I (we) acknowledge receipt of a copy of the FFNWB Home Equity Line of Credit Disclosure and the Consumer Financial Protection Bureau booklet, "What you should know about home equity lines of credit," at the time this application was provided to me (us).

TELEPHONE COMMUNICATIONS CONSENT:

I acknowledge that by providing First Financial Northwest Bank with a telephone number for a cellular phone or other wireless device, including a number that you later convert to a cellular number, you are expressly consenting to receiving non-marketing communications-including but not limited to prerecorded or artificial voice message calls, text messages, and calls made by an automatic telephone dialing system-from us, affiliates or agents at that number. This express consent applies to each such telephone number that you provide us now or in the future. Calls and messages may incur access fees from your cellular provider.

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

Loan Originator's Signature	Date:	
Loan Originator's Name (print or type):	Loan Originator Identifier:	
Loan Originator's Phone Number (including area code):		
Loan Origination Company's Name: First Financial Northwest Bank	Loan Origination Company Identifier: NMLS# 416682	Loan Origination Company's Address: 201 Wells Avenue South, Renton, WA 98057

For FFNWB use only			
Date Application Received:		Received By:	
Identification			
ID Type:	Issuing State:	ID Type:	Issuing State:
ID Number:		ID Number:	
Issue Date: Select Date	Expiration Date: Select Date	Issue Date: Select Date	Expiration Date: Select Date

