

It is a Crime to Intentionally Falsify Information on this Application

# MANUFACTURED HOME FINANCE APPLICATION

FIRST CREDIT CORPORATION OF NEW YORK, INC. • 21 NORTH MAIN STREET • GLOVERSVILLE, NY 12078

1-518-725-5000 • FAX: (518) 725-1670 • www.firstcreditcorp.com

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of sex or marital status. The Federal agency which administers compliance with this law concerning this bank is the Comptroller of Currency, Consumer Affairs Division, Washington, DC 20219.

**APPLICATION WAS TAKEN**  
 BY PHONE  BY MAIL  
 IN PERSON  BY INTERNET

LAST NAME	FIRST NAME	MIDDLE INITIAL	EMAIL ADDRESS	NO. OF DEP.	DATE OF BIRTH
PRESENT ADDRESS - NO. & STREET		CITY	STATE	ZIP CODE	YEARS
FORMER ADDRESS - NO. & STREET		CITY	STATE	ZIP CODE	YEARS
PRESENT EMPLOYER (IF RETIRED, ENTER INCOME SOURCES)		POSITION		GROSS WAGES	
		YEARS _____ MONTHS _____		<input type="checkbox"/> WEEKLY <input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> MONTHLY	
EMPLOYER ADDRESS (IF RETIRED, ENTER N.A.)		CITY	STATE	ZIP CODE	BUSINESS PHONE NUMBER
FORMER EMPLOYER (IF LESS THAN 3 YEARS)		POSITION		ADDRESS	NO. YEARS THERE
MARITAL STATUS: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED					
OPTIONAL Alimony or child support or separate maintenance payments are optional information and need not be revealed if the applicant does not choose to rely on such income in applying for credit.			<input type="checkbox"/> MONTHLY <input type="checkbox"/> SEMI-ANNUALLY <input type="checkbox"/> QUARTERLY <input type="checkbox"/> YEARLY SOURCE _____		
CHECKING - BANK		BALANCE	SAVINGS - BANK		BALANCE
		\$ _____			\$ _____
DEBTS - LIST ALL DEBTS (USE EXTRA SHEET IF NECESSARY)					
LANDLORD OR MORTGAGE HOLDER		MONTHLY PAYMENT	PRESENT BALANCE	MONTHLY PAYMENT	PRESENT BALANCE
1. _____					
AUTO - LIEN HOLDER	YEAR / MAKE				
2. _____					
3. _____					
AMOUNT OF CHILD SUPPORT / ALIMONY PAID	NO. OF DEPENDENTS AND AGES	VALUE OF ASSETS, INVESTMENTS AND RETIREMENT ACCOUNTS			
\$ _____ MONTHLY					
ARE THERE ANY UNSATISFIED JUDGMENTS AGAINST YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO			OMIT IF MORE THAN 7 YEARS \$ _____		
IF YES, TO WHOM OWED?			WERE YOU EVER BANKRUPT? <input type="checkbox"/> YES <input type="checkbox"/> NO		
			OMIT IF MORE THAN 10 YEARS IF YES, WHERE? _____ YEAR		
NAME OF NEAREST RELATIVE OR FRIEND NOT LIVING WITH YOU		ADDRESS		PHONE	

IF YOU INTEND TO APPLY FOR JOINT CREDIT, PLEASE INITIAL HERE  **IF CO-APPLICATION, PLEASE COMPLETE BELOW.** IF YOU WISH US TO CONSIDER INFORMATION IN ADDITION TO THAT LISTED BELOW, ATTACH A SEPARATE SHEET OR COMPLETE A SEPARATE APPLICATION.

LAST NAME	FIRST NAME	MIDDLE INITIAL	CELL OR RESIDENCE PHONE	NO. OF DEP.	DATE OF BIRTH
PRESENT ADDRESS - NO. & STREET		CITY	STATE	ZIP CODE	YEARS
PRESENT EMPLOYER (IF RETIRED, ENTER INCOME SOURCES)		POSITION		GROSS WAGES	
		YEARS _____ MONTHS _____		<input type="checkbox"/> WEEKLY <input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> MONTHLY	
EMPLOYER ADDRESS (IF RETIRED, ENTER N.A.)		CITY	STATE	ZIP CODE	BUSINESS PHONE NUMBER
FORMER EMPLOYER (IF LESS THAN 3 YEARS)		POSITION		ADDRESS	NO. YEARS THERE
MARITAL STATUS: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED					

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

YEAR, MAKE AND SIZE OF HOME \_\_\_\_\_

SERIAL # \_\_\_\_\_

SELLER'S NAME \_\_\_\_\_

LIEN HOLDER \_\_\_\_\_

DO YOU INTEND TO OCCUPY THIS HOME AS YOUR PRIMARY RESIDENCE?  YES  NO

SIGNATURE OF CO-APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SELLING PRICE \_\_\_\_\_

DOWN PAYMENT \_\_\_\_\_

COMMUNITY \_\_\_\_\_ LOT RENT \$ \_\_\_\_\_

ADDRESS \_\_\_\_\_ LOT # \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

DESIRED TERM OF LOAN \_\_\_\_\_

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 credit is approved. I am informed that you may request a consumer report (credit report) in connection with this application, and that, if I ask you, you will inform me if such a report is requested and the name and address of the consumer reporting agency that furnished the report. I am also informed that subsequent consumer reports may be requested, or used, in connection with any update, renewal or extension of the credit application. I authorize you to obtain such reports and to check my employment history.

RIGHT TO RECEIVE COPY OF APPRAISAL— If you have paid for an appraisal, you have the right to receive a copy free of charge.

### INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling, in order to monitor the Lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you choose not to furnish it, under Federal regulations this lender is required to note ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish the following information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for.)

<b>APPLICANT</b>	<input type="checkbox"/> I DO NOT WISH TO FURNISH THIS INFORMATION
<b>Ethnicity:</b>	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>Race:</b>	<input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White
<b>Sex:</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female

<b>CO-APPLICANT</b>	<input type="checkbox"/> I DO NOT WISH TO FURNISH THIS INFORMATION
<b>Ethnicity:</b>	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>Race:</b>	<input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White
<b>Sex:</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female

TO BE COMPLETED BY LOAN ORIGINATOR: Loan Originator's Signature	Loan Originator's Name	Loan Originator's Identifier	Date
Loan Origination Company's Name <b>First Credit Corp. of New York, Inc.</b>	Loan Origination Company Identifier & Phone <b>3228 518-725-5000</b>	Loan Origination Company's Address <b>21 N. Main St., Gloversville, NY 12078</b>	

Licensed by the State of Connecticut Banking Department  
Mortgage Lender License, MB-3228

Licensed by the Delaware Office of the State Bank  
Commissioner, Lender License #5267

Massachusetts Office of Consumer Affairs & Business Regulation,  
Exempt Company Registration, NMLS ID 3228

Licensed by the New Jersey Department Banking & Insurance,  
Residential Mortgage Lender License, NMLS ID 3228

New York State Department of Financial Services,  
Exempt Mortgage Banker Registration, License # C800295

Licensed by the Pennsylvania Department of Banking,  
Mortgage Lender License # 46166