

**APPLICATION FOR CREDIT
CHECKING PROTECTION AND PERSONAL LINE OF CREDIT**

PRODUCT APPLYING FOR:			
<input type="checkbox"/> Checking Protection <input type="checkbox"/> Personal Line of Credit			

INFORMATION REGARDING APPLICANT							
FULL NAME (Last, First, Middle)		BIRTH DATE		HOME PHONE		BUSINESS PHONE	
DRIVERS LICENSE NO.	STATE	DATE OF ISSUE	DATE OF EXPIRATION		SOCIAL SECURITY OR TAX I.D. NO.		
PHYSICAL STREET ADDRESS			MAILING ADDRESS			HOW LONG AT PRESENT ADDRESS?	
PRESENT EMPLOYER		OCCUPATION	EMPLOYERS ADDRESS			HOW LONG WITH PRESENT EMPLOYER?	
PAST EMPLOYER		OCCUPATION	PREVIOUS EMPLOYERS ADDRESS			HOW LONG WITH PREVIOUS EMPLOYER?	
PRESENT GROSS MONTHLY SALARY \$ /MONTH		MONTHLY MORTGAGE/RENTAL AMOUNT \$ /MONTH		NO. OF DEPENDENTS	OTHER INCOME \$ /	SOURCE	
OTHER EXPENSES \$ /	EXPENSES		ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION				

ASSETS OWNED (Use separate sheet if necessary.)			
DESCRIPTION OF ASSETS	VALUE	SUBJECT TO DEBT?	NAMES OF OWNERS
TOTAL ASSETS	\$		

OUTSTANDING DEBTS (Include charge accounts, credit cards, mortgages, rent, etc. Use separate sheet if necessary.)			
CREDITOR	TYPE OF DEBT OR CREDITOR	NAME IN WHICH ACCOUNT IS CARRIED	PRESENT BALANCE
TOTAL DEBTS			\$

AUTHORIZATION: By signing this form, you understand and agree that First Montana Bank, Inc. ("we", "us", or "our"), as the creditor and issuer of your account, will rely on the information provided here in making this credit decision, and you certify that such information is accurate and complete to the best of your knowledge. If we open an account based on this application, you will be individually liable for all authorized charges and for all fees referred to in your contract, which may be amended from time to time. We may request consumer credit reports about you for evaluating this application and in the future for reviewing account limits, for renewal, for servicing and collection purposes, and for other legitimate purposes associated with your account. Upon your request, we will inform you if a consumer report was requested and, if it was, provide you with the name and address of the consumer reporting agency that furnished the report. By signing this form, you also agree that we may verify your employment, income, address and all other information provided. By signing this form you certify that you have read and understood the disclosures and you agree to the terms of this application.

APPLICANT SIGNATURE	
X	DATE