



FIRST NATIONAL BANK
One Bank. Every Service.

Mortgage Prequalification Application

Account Holder Information:

Name (First M. Last): _____
 Social Security No.: _____ Date of Birth: _____
 Physical Address: _____
 Mailing Address: _____
 City, State Zip: _____
 Home Phone No.: _____ Cell Phone No.: _____
 Work Phone No.: _____ E-mail Address: _____

Contact Information:

Time Available for Contact: _____ A.M. P.M.
 Contact At: Home Work Cell

Mortgage Information:

Please Select One: Purchase Refinance
 If Refinance, Cash Out? Yes No
 Term Requested: 10 Year 15 Year Other: _____
 20 Year 30 Year

Optional Information:

To further assist in pre-qualification, please provide the following *optional* information:

Gross Income: \$ _____ (Borrower)
 \$ _____ (Co-Borrower)
 Total Revolving Debt: \$ _____ per month
 Total Installment Debt: \$ _____ per month
 Property Value (for Refinance): \$ _____
 Sales Price of Property (for Purchase): \$ _____
 Loan Amount: \$ _____

- I certify under penalties of perjury, the statements checked in this section are true.
-
- I authorize First National Bank of Chadron to obtain a copy of my current credit report as a condition of acceptance of this application and for the purpose of an extension of or renewal of credit.
-

Please Sign & Mail to:

First National Bank
P. O. Box 1351
Chadron, NE 69337

or

First National Bank
P. O. Box 45
Ainsworth, NE 69210

A First National Bank loan officer will be contacting you to discuss your prequalification.

Signature _____

Date _____