

Marine Loan Application



| | | | | | | |
|--------------------------|-----------------|-------------------------|----------------------|--|--|--|
| For Bank Use Only | | | | <input type="checkbox"/> Walk-In <input type="checkbox"/> Mail-In <input type="checkbox"/> Telephone | | |
| Bank # _____ | Branch # _____ | RU # _____ | Branch Contact _____ | | | |
| Employee # _____ | Network # _____ | Co-Applicant For: _____ | App ID # _____ | | | |

Section A-Please Tell Us About Your Loan Request

| | | | | | | | |
|--|------------------------|---------------------------|---|--|---|--|--|
| I (We) hereby make application for a loan for the <input type="checkbox"/> purchase or <input type="checkbox"/> refinance of \$ | | Term | Rate | Selling Price \$ | Cash Down Payment \$ | Vessel Usage <input type="checkbox"/> Charter <input type="checkbox"/> Pleasure <input type="checkbox"/> Live Aboard | Engines <input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Gas <input type="checkbox"/> Diesel |
| Seller's Name and Address | | | | | Phone | <input type="checkbox"/> Dealer <input type="checkbox"/> Broker <input type="checkbox"/> Individual | Horsepower: |
| <input type="checkbox"/> New <input type="checkbox"/> Used | Length | Manufacturer | Year | Model/Type | <input type="checkbox"/> Metal <input type="checkbox"/> Wood <input type="checkbox"/> Fiberglass | | Manufacturer: |
| Hull Identification Number (HIN) | Official Number (USCG) | State Registration Number | <input type="checkbox"/> Individual - I am applying for an individual account in my own name, and am relying on my own income and assets, and not the income or assets of another person, as the basis for repayment of the credit requested. | | | | |
| Description of Trade-In | | | Trade-In \$ | <input type="checkbox"/> Joint - We are applying for joint credit, and are relying on our joint income and assets as the basis for repayment for the credit requested. | | Engines <input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Gas <input type="checkbox"/> Diesel | Horsepower: |
| Length | Manufacturer | Year | Model/Type | <input type="checkbox"/> Metal <input type="checkbox"/> Wood <input type="checkbox"/> Fiberglass | | Manufacturer: | |

Will the vessel be used as a dwelling/residence (primary or otherwise)? Mark Box & Initial Yes No

Section B-Please Tell Us About Yourself

| | | | | | | | | | |
|--|--|---|-----------|---|-------------------------|-------------------------------|----------------|---------------------------|-------------------------------|
| Corp, LLC, TRUST Name | | | | | | TIN/EIN: | | | |
| Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Are you a non-resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No | | List all Countries of Citizenship | | | | | |
| First Name | | Initial | | Last Name | | Date of Birth | | Social Security Number | |
| Physical Residential Address | | | | | City | State | County | Zip Code | |
| Primary Phone (required) | | Cell phone | | Work Phone | | Email address | | | |
| <p>You agree as follows: On each phone number that you give us on this application, whether land line or cell phone, you consent to SunTrust Bank, its affiliates, our agents, and assignees of any of us contacting you at the number by calling, texting, or sending other electronic messages, from time to time, for any reason about your accounts with SunTrust Bank and its affiliates, including but not limited to, for collection and payment purposes. You agree that automated dialing equipment or prerecorded voice messages may be used for any of these purposes.</p> | | | | | | | | | |
| Number Of Dependents | | Place of Birth | | | | | | | |
| <input type="checkbox"/> Rent <input type="checkbox"/> Lives <input type="checkbox"/> Own/Buying <input type="checkbox"/> W/Others | | Mthly Rent/Mtg Pmt \$ | | Landlord/Mortgagor | | Yrs/Mths There Yrs Mths | Year Purchased | Purchase Price \$ | Second Mtg. Balance \$ |
| Previous Address (if less than two years at above) | | | | City | | State | | Zip Code | Yrs/Mths There Yrs Mths |
| Name of Employer * | | | Job Title | | What is your Occupation | | Start Date | Gross Annual Salary \$ | |
| Name of Previous Employer * (if less than two years at current employment) | | | | | Position/Occupation | | Start Date | End Date | |
| Checking Account <input type="checkbox"/> Yes <input type="checkbox"/> No | | Bank | | Savings Account <input type="checkbox"/> Yes <input type="checkbox"/> No | | Bank | | | |
| Note: You do not have to include information about income from alimony, child support, or separate maintenance payments, unless you want us to consider this income in connection with this application for credit. | | | | | | | | Source Of Other Income | Annual Amount \$ |
| Name and Address of Closest Relative Not Living At Your Address | | | | | | Relationship | | Home Phone | |

***If you are self-employed, on commission, or a substantial portion of your income is from a source other than salary, please attach a copy of your last two years' federal tax returns.**

Section C-Please Tell Us About Your Co-Applicant (If you are applying for an individual account, go to Section D)

| | | | | | | | | | |
|--|--|---|-----------|---|-------------------------|----------------------|------------|---------------------------|---------------------|
| Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Are you a non-resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No | | List all Countries of Citizenship | | | | | |
| First Name | | Initial | | Last Name | | Date of Birth | | Social Security Number | |
| Physical Residential Address | | | | | City | State | County | Zip Code | |
| Primary Phone (required) | | Cell Phone | | Work Phone | | Number of Dependents | | Place of Birth | |
| <p>You agree as follows: On each phone number that you give us on this application, whether land line or cell phone, you consent to SunTrust Bank, its affiliates, our agents, and assignees of any of us contacting you at the number by calling, texting, or sending other electronic messages, from time to time, for any reason about your accounts with SunTrust Bank and its affiliates, including but not limited to, for collection and payment purposes. You agree that automated dialing equipment or prerecorded voice messages may be used for any of these purposes.</p> | | | | | | | | | |
| Name of Employer * | | | Job Title | | What is your Occupation | | Start Date | Gross Annual Salary \$ | |
| Checking Account <input type="checkbox"/> Yes <input type="checkbox"/> No | | Bank | | Savings Account <input type="checkbox"/> Yes <input type="checkbox"/> No | | Bank | | | |
| Note: You do not have to include information about income from alimony, child support, or separate maintenance payments, unless you want us to consider this income in connection with this application for credit. | | | | | | | | Source Of Other Income | Annual Amount \$ |

***If you are self-employed, on commission, or a substantial portion of your income is from a source other than salary, please attach a copy of your last two years' federal tax returns.**

Section D-Please Tell Us About Your Financial Obligations

List all your current obligations, including banks, finance co., dept. stores, credit cards, leases, unpaid taxes, alimony, and child support, etc.
A Personal Financial Statement is required on all Marine Loans of \$25,000 or more.

| Creditor | Account Number | Current Outstanding Balance/ Date Paid Off | Monthly Payment (or other term) |
|---|----------------|---|------------------------------------|
| Auto Make Year/Model Where Financed | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |

In compliance with recent federal legislation, we will be verifying pertinent information which will enable us to confirm your identity.

A copy of your tax return, W2, or earnings statement must be submitted prior to your settlement date for income verification.

I/We authorize the Creditor to make whatever credit inquiries it deems necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on this application. I/We authorize and instruct any person, including but not limited to, all local, state, or federal governmental agencies, or consumer reporting agencies, to complete and furnish the Creditor any information that it may have or obtain in response to such credit inquiries and agree that such information, along with this application, shall remain the Creditor's property whether or not credit is extended. I/We authorize the Creditor to furnish credit information, including insurance information, to persons who may lawfully receive and use such information.

I/We certify that the information provided in this application is being given for the purpose of obtaining the credit described above and is true and correct as of this date.

| | |
|--|---|
| Applicant's Signature _____ Date _____ | Co-Applicant's Signature _____ Date _____ |
|--|---|

| | |
|---|---|
| Co-Applicant's Signature _____ Date _____ | Co-Applicant's Signature _____ Date _____ |
|---|---|

1.2A Please give this completed application to your SunTrust Bank Representative or mail to: SunTrust Bank, Attn: Marine Lending Department, CMD 7905, 147 Old Solomons Island Road, 5th Floor, Annapolis, MD 21401 Phone 1-(800) 797-BOAT, Fax 1-410-224-6081

Section E-Please Provide Your Personal Financial Statement as of (date) _____

Important: Check box "J" if assets or liabilities are owned jointly or owed jointly.

| Assets | Amount | J |
|--|--------|---|
| Cash on Hand, in Checking and in Savings (Sched 1) | \$ | |
| Retirement Accts (IRA, SEP, 401K, etc.) (Schedule 1) | \$ | |
| Accounts Receivable - Good | \$ | |
| Notes Receivable - Good | \$ | |
| Stocks, Bonds and Mutual Funds (Schedule 2) | \$ | |
| Cash Value Life Insurance (Schedule 3) | \$ | |
| Automobiles (Number Owned _____) | \$ | |
| Real Estate (Schedule 4) | \$ | |
| Interest in Business Owned | \$ | |
| Boat Presently Owned | \$ | |
| Deposit on RV Being Purchased | \$ | |
| Other Assets 1. | \$ | |
| 2. | \$ | |
| 3. | \$ | |
| 4. | \$ | |
| 5. | \$ | |
| Total Assets | \$ | |

| Liabilities | Amount | J |
|---|--------|---|
| Notes Payable to Banks (Section D) | \$ | |
| Notes Payable to Others | \$ | |
| Loans Against Life Insurance | \$ | |
| Accounts Payable 1. | \$ | |
| 2. | \$ | |
| 3. | \$ | |
| 4. | \$ | |
| 5. | \$ | |
| Loans Payable on Automobiles | \$ | |
| Loans Against Real Estate (Schedule 4) | \$ | |
| Other Liabilities 1. | \$ | |
| 2. | \$ | |
| 3. | \$ | |
| 4. | \$ | |
| 5. | \$ | |
| Total Liabilities | \$ | |
| Net Worth (Total Assets minus Total Liabilities) | \$ | |

Please use the space below or a separate sheet if you need additional space.

Schedule 1 – Banks Where Accounts Are Maintained (Show joint accounts by checking Box "J")

| Name of Depository | Name of Joint Owner | Balance on Deposit | J | Account Type | J | Account Number |
|--------------------|---------------------|--------------------|---|--------------|---|----------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Schedule 2 – Stocks, Bonds and Mutual Funds

| Describe and show number of shares or face value | Title in Name of | Current Market Value | Pledged? |
|--|------------------|----------------------|----------|
| | | | |
| | | | |
| | | | |
| | | | |

Schedule 3 – Life Insurance

| Name of Insurance Company | Name of Insured | Face Amount | Cash Value |
|---------------------------|-----------------|-------------|------------|
| | | | |
| | | | |
| | | | |

Schedule 4 – Real Estate

| Description and Location | Title in Name of | Market Value | Amount Owed | Monthly Payment | Payable to Whom | Monthly Rental Income |
|--------------------------|------------------|--------------|-------------|-----------------|-----------------|-----------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Have either of you ever declared bankruptcy or had any judgments, repossessions or other legal proceedings filed against you? Yes No

Have either of you obtained credit under any other name? Yes No If yes, what name? _____

Are either of you obligated to make monthly alimony, child support or maintenance payments? Yes No If yes, show amount. _____

Are you a co-maker, endorser, or guarantor on any loan? Yes No Are you liable on debts not shown such as leases or unpaid taxes? Yes No If yes to either of these questions, please provide details.

Please Use This Space For Any Additional Information: