



# FREE HOME PREQUALIFYING

## Authorization to Release Information

(Blanket Authorization)

Applicant Name: \_\_\_\_\_

(Please Print)

Applicant Name: \_\_\_\_\_

(Please Print)

I/We certify that all the information is true and complete. I/we made no misrepresentations in the loan authorization or other documents, nor did I/We omit any pertinent information. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage as applicable under the provisions of Title 18, United State Code, Section 1014.

I/We hereby give my/our consent for information contained in a loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program, to be verified or re-verified. This verification or re-verification may be made by Farmers State Bank (lender), its agents, successor and assigns either directly or through a credit reporting agency. Such information includes, but it not limited to, employment history, and copies of income tax returns and/or W-2 forms.

A photographic or carbon copy of the signature(s) of the undersigned will be equivalent of the original and may be used as a duplicate original.

\_\_\_\_\_  
Borrower Address, City, State, Zip

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Co-Borrower Address, City, State, Zip

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Borrower Home Phone

\_\_\_\_\_  
Borrower Gross Monthly Income

\_\_\_\_\_  
Co-Borrower Home Phone

\_\_\_\_\_  
Co-Borrower Gross Monthly Income

\_\_\_\_\_  
Borrower Employer

\_\_\_\_\_  
# of Years with Employer

\_\_\_\_\_  
Borrower Work Phone

\_\_\_\_\_  
Co-Borrower Employer

\_\_\_\_\_  
# of Years with Employer

\_\_\_\_\_  
Co-Borrower Work Phone

\_\_\_\_\_  
Cash for Down Payment/Closing Costs

**If Co-Applicant Signature applies, then:  
WE INTEND TO APPLY FOR JOINT CREDIT**

\_\_\_\_\_  
Borrower Signature

\_\_\_\_\_  
SSN

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Borrower Signature

\_\_\_\_\_  
SSN

\_\_\_\_\_  
Date



## **RIGHT TO RECEIVE A COPY OF APPRAISALS**

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, even if your loan does not close.

You can pay for an additional appraisal for your own use at your own cost.

# **THE FARMERS STATE BANK of WESTMORELAND**

## **Electronic Signatures in Global and National Commerce Act (ESIGN) DISCLOSURE AGREEMENT AND CONSENT**

By accepting this Electronic Disclosure Agreement and Consent form, you consent and agree that Farmers State Bank may provide you disclosures related to products, services or accounts you may receive or access in connection with your relationship with us. It is highly recommended that you carefully read this disclosure in its entirety and save a copy for your personal records.

The words “we,” “us” and “our” refer to Farmers State Bank, and the words “you” and “your” mean you, the individual(s) or entity identified on the disclosures. As used in the Disclosure, “account” means the account you have with us.

### Disclosures and Notices Provided in Electronic Form

You agree that we may provide you with any disclosures related to products, services or accounts you may receive or access in electronic format, to the extent allowed by law, and that we may discontinue sending paper documents to you, unless and until you withdraw your consent as described below.

If you choose NOT to consent to receive electronic disclosures, you may request to receive paper copies at no additional charge.

To request a paper copy of disclosures, please contact Farmers State Bank at:

Farmers State Bank  
PO Box 330  
Westmoreland, KS 66549  
(785) 457-3316

### Hardware and Software Requirements

To access, view and retain electronic communications your system will need the following requirements:

- To print or save the disclosure, a printer or sufficient hard drive space or other media;
- A valid, active email address;
- A working internet connection;
- A personal computer, mobile device, tablet or mac running a supported operating system;
- Adobe Acrobat Reader DC, upgraded to the latest version for the most reliable and secure experience. Can be downloaded for free at [www.adobe.com](http://www.adobe.com); and

- For Security purpose, the most current browser version of your choice, such as; Microsoft Edge, Chrome, Mozilla/Firefox or Safari (MacOS) (Note: Cookies must be enabled).

Farmers State Bank is not responsible or liable for any damages, claims, costs or losses as a result of using this service. Please read your terms and conditions for more information.

How to Cancel Electronic Disclosure Consent

You may withdraw your consent to receive account disclosures at any time in electronic form, at no additional charge, by:

1. Calling Farmers State Bank at (785) 457-3316; or
2. Contacting your account officer at the nearest Farmers State Bank location.

Termination/changes

Farmers State Bank reserves the right, in sole discretion, to discontinue the provision of your account information electronically, or to terminate or change the terms and conditions on which we provide account information electronically. The Bank will provide you with notice of any such termination or change as required by law.

Customer Consent

I have read the information about the use of electronic records, disclosures, notices and e-mail, and consent to the use of electronic records for the delivery of Required Information in connection with our relationship. I will be able to view this information using my computer and software. I have an account with an internet service provider, and I am able to send e-mail and receive e-mail with hyperlinks to websites and attached files. I also consent to the use of electronic records and electronic signatures in place of written documents and handwritten signatures. I understand that I must update my contact information to continue receiving electronic disclosures by contacting Farmers State Bank at (785) 457-3316.

Customer Contact Information-*Must complete all lines*

Customer Name-Printed: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ @ \_\_\_\_\_

Contact Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Customer Signature: \_\_\_\_\_