

First Priority Bank
AIRCRAFT LOAN APPLICATION

Please complete this application by typing in the information in the highlighted boxes. You will need to then print the application and **initial in the box below for joint intent**, and then **sign and date** on the last page. If you wish to email to us, please send an email to amcclure@firstpriority.com or aircraft@firstpriority.com stating you have a completed application to send. We will then send you a secure email you may reply to and attach this document.

You may also mail or fax the application to us at the address or fax number shown below.

Along, with your completed, signed application, please return with TWO (2) FORMS OF ID (one of which must be current driver's license or state issued photo ID card), LAST TWO (2) YEARS OF FEDERAL TAX RETURNS WITH ALL W-2'S & 1099'S AND LAST TWO (2) PAYSTUBS. Business applicants must provide proof of business (such as Articles of Incorporation, government-issued business license, partnership agreement, etc.) YOUR APPLICATION WILL NOT BE PROCESSED WITH OUT THESE DOCUMENTS.

First Priority Bank's policy does not allow the opening of accounts to applicants that have applied for, but have not yet received a taxpayer identification number.

NOTE: BEFORE any aircraft loan can be funded, we require **complete copies** of the airframe logbooks and copies of engine logs from the last detailed major overhaul to the present time.

Fax the information to (918)825-0519

Or

Mail to:

First Priority Bank
Attn: April McClure
P.O. Box 218
Pryor, OK 74362

Contact Info:

April McClure
Email: amcclure@firstpriority.com
PH: (800)462-7032
(918)825-2121

IMPORTANT: Read these directions before completing this Statement, and **check the appropriate box below.**

- ☐ I intend to apply for credit individually. _____ (initial)
☐ We intend to apply for joint credit. _____ (initial) _____ (initial)

► If you are applying for individual credit in your own name and are relying on your own income or assets and not the income of another person as the basis for repayment of the credit requested, complete only Sections A and D.

► If you are applying for joint credit with another person, complete all Sections providing information in each Section B about the joint applicant.

► If your business is purchasing the aircraft, please complete Section C and D, along with Section A.

► If this statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete Section A and D.

► Please complete Section E – Aircraft Specification Worksheet

USA Patriot Act/Customer Identification Program: Important Information about Procedures for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask your name, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identification documents. We will let you know if additional information is required.

AMOUNT REQUESTED	PAYMENT DATE	PROCEEDS OF CREDIT TO BE USED FOR:

◀Applicant Information▶

SECTION A – INDIVIDUAL INFORMATION	SECTION B – JOINT PARTY INFORMATION
Name (First, Middle Initial, Last)	Name (First, Middle Initial, Last)
SSN/Tax ID Number	SSN/Tax ID Number
Date of Birth	Date of Birth
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone	Home Phone
Work Phone	Work Phone
Cell Phone	Cell Phone
Email Address	Email Address
Drivers License/State ID Card No. _____	Drivers License/State ID Card No. _____
State _____ Date of Issuance _____	State _____ Date of Issuance _____
Date of Expiration _____	Date of Expiration _____

◀Residence▶

SECTION A – INDIVIDUAL INFORMATION	SECTION B – JOINT PARTY INFORMATION
Current Physical Address _____ City, State & Zip	Current Physical Address _____ City, State & Zip
How many years at Current Address?	How many years at Current Address?
Mailing Address (if different from physical) _____ City, State, & Zip	Mailing Address (if different from physical) _____ City, State & Zip
Previous Address Years There _____ _____ City, State, & Zip	Previous Address Years There _____ _____ City, State, & Zip

◀Employer Information▶

SECTION A – INDIVIDUAL INFORMATION	SECTION B – JOINT PARTY INFORMATION
Present Employer Years There _____	Present Employer Years There _____
Physical Address _____	Physical Address _____
City, State, & Zip	City, State, & Zip
Occupation	Occupation
Position or Title	Position or Title
Present Gross Salary or Commission \$ _____ PER _____	Present Gross Salary or Commission \$ _____ PER _____
Previous Employer Years There _____	Previous Employer Years There _____
Physical Address _____	Physical Address _____
City, State, & Zip	City, State, & Zip
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.	
Other Income \$ _____ PER _____	Other Income \$ _____ PER _____
Source	Source
Is any income listed above likely to be reduced before the credit requested is paid off? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain:	

◀Relative Contacts▶

List Nearest Relative Not Living With You –

SECTION A - INDIVIDUAL INFORMATION	SECTION B – JOINT PARTY INFORMATION
Relative's Name	Relative's Name
Relationship	Relationship
Physical Address	Physical Address
City, State, Zip	City, State, Zip
Phone	Phone

◀Business Information▶

SECTION C- If your business is purchasing the aircraft, please complete this section.		
Legal Name of Business	d/b/a name, if different	
Business Address (No P.O. Boxes)	Mailing Address (if different)	
City	City	
State Zip	State Zip	
Phone	Fax	
Email	Federal Tax ID Number	
Date Established	Current Ownership Since Date	
Description of Business	Business Structure (check one) <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> LLC	<input type="checkbox"/> S Corporation <input type="checkbox"/> C Corporation <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Other
State of Incorporation	Number of Employees	

◀Financial Information▶

SECTION D – FINANCIAL INFORMATION	
Assets (what you own)	In Dollars
Checking Accounts	\$
Savings Accounts	\$
IRA/Retirement Accounts	\$
US Gov't & Marketable Securities	\$
Other Securities	\$
Real Estate Owned	\$
Automobiles	\$
Recreational Vehicles	\$
Vessel/Aircraft	\$
Other Personal Property	\$
Other Assets/Itemize:	
1) \$	2) \$

SECTION D – FINANCIAL INFORMATION		
Bank Information		
Account Type (check one)	Account Number	Bank Name/Location
<input type="checkbox"/> Checking <input type="checkbox"/> Other <input type="checkbox"/> Savings		
<input type="checkbox"/> Checking <input type="checkbox"/> Other <input type="checkbox"/> Savings		
<input type="checkbox"/> Checking <input type="checkbox"/> Other <input type="checkbox"/> Savings		

Liabilities (what you owe)			
Debt Type	Unpaid Balance	Monthly Payment	Months Remaining
Mortgage/Personal Residence	\$	\$	\$
Home Equity Loan (2 nd Mortgage)	\$	\$	\$
Notes Payable – Income Property	\$	\$	\$
Notes Payable – Vessel/Aircraft/RV	\$	\$	\$
Notes Due – Personal	\$	\$	\$
Credit Cards	\$	\$	\$
Unpaid Income Tax Due	\$	\$	\$
Other Liabilities/Itemize			
1)	\$	\$	\$
2)	\$	\$	\$
3)	\$	\$	\$

◀Contingent Liabilities▶

SECTION D – CONTINGENT LIABILITIES Please answer the following questions	
Are you or your business the endorser, co-maker, or guarantor of anyone's debt or loans?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you financially liable on any leases and/or contracts?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any Legal Claims you are financially liable for?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you or your business have any unpaid tax liabilities?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Amount of any tax liens?	\$
Are you a defendant in any suits or legal action?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you or your business declared bankruptcy in the last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, explain. Year?	
If you answered yes to any questions, please explain:	

◀ Aircraft Specification Worksheet ▶

SECTION E - Aircraft Information										
Year			Make			Model				
Registration Number			Serial Number			Purchase Price \$				
Is aircraft currently airworthy? <input type="checkbox"/> Yes <input type="checkbox"/> No			What is the date last flown?			Has aircraft ever operated under foreign registry? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which country? _____ Dates? _____				
Will aircraft be leased? <input type="checkbox"/> Yes <input type="checkbox"/> No			Where will aircraft be based?			Avg. (Expected) Total Hrs/Yr				
Are logs complete? <input type="checkbox"/> Yes <input type="checkbox"/> No Missing Yrs Airframe: Missing Yrs Engine: Missing Yrs Prop:			Damage History? <input type="checkbox"/> Yes <input type="checkbox"/> No			Damage History - What/When?				
Airframe			Engine			List Avionics				
Current Airframe Total Hours			Engine Make & Model			Nav/Com: Nav/Com:				
Date of Last Annual			SMOH & Date:			GPS: GPS/COM:				
AF Hours when Completed			STOH & Date:			A/P:				
Exterior Condition "10 Reserved for Brand New"						HSI:				
10	9	8	7	6	5	4	3	2	1	MFD/EFIS/PFD:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Comments:						FD:				
						Stormscope:				
Interior Condition "10 Reserved for Brand New"						Engine Monitor:				
10	9	8	7	6	5	4	3	2	1	X-Ponder:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Comments: (Interior – Leather <input type="checkbox"/> Cloth <input type="checkbox"/>)						Audio Panel:				
						Radar:				
Refurbished? <input type="checkbox"/> Yes <input type="checkbox"/> No			Was Interior totally replaced or Seat Covers? <input type="checkbox"/> Yes <input type="checkbox"/> No			TCAS:				
Year Hrs						WX-Data Link <input type="checkbox"/> Yes <input type="checkbox"/> No				
Other Information:						ADSB Is It: <input type="checkbox"/> In <input type="checkbox"/> Out				
						Air-Condition <input type="checkbox"/> Yes <input type="checkbox"/> No				
						MODS				
						List:				

I acknowledge that I have made this application with the intent that you should rely upon the information contained herein in granting the credit requested. I understand that, if the loan is granted, you may report information concerning the credit to consumer reporting agencies and others.

I affirm that my answers are complete and true and authorize you to verify or obtain any information necessary concerning them. Upon your request, I further authorize any firm or individual from whom I may have obtained or requested credit, to furnish you with the details of that transaction. I also agree to provide current financial information upon request in a form that is acceptable to you as well as any additional information needed to verify my identity. I am authorizing First Priority Bank to check my credit and employment history.

Signature	Signature
Date Signed:	Date Signed:

BEFORE SUBMITTING, INCLUDE THE FOLLOWING:

TWO (2) FORMS OF ID (ONE MUST BE A CURRENT DRIVER'S LICENSE OR STATE ISSUED PHOTO ID)

LAST TWO (2) YEARS OF FEDERAL TAX RETURNS WITH ALL W-2'S & 1099'S

TWO (2) MOST RECENT PAYSTUBS

BUSINESS APPLICANTS, IN ADDITION TO THE ABOVE, MUST INCLUDE:

ARTICLES OF INCORPORATION, GOVERNMENT-ISSUED BUSINESS LICENSE, PARTNERSHIP AGREEMENT AND OPERATING AGREEMENT

Equal Credit Opportunity Notice

Commercial Applicants Credit Denial Notice: If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement, or similar types of business credit in this application, and if your application for business credit is denied. You have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact
First Priority Bank Attn: April McClure P.O. Box 218 Pryor, OK 74362 or Ph: 918.825.2121 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Notice: The federal ECOA prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract) because all or a part of the applicants' income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is: Federal Reserve Consumer Help Center P.O Box 1200 Minneapolis, Minnesota 55480