

Thank you for considering Union Bank for your home equity financing. Enclosed please find the loan application, necessary disclosures and required forms to process your loan request.

Along with the completed and signed documents, please provide the following:

Income Information:

- Copy of most recent pay stubs and W-2's
- **If self employed or have rental income**, copies of last 2 years personal federal tax returns with supporting schedules.
- If self-employed, a year-to date profit and loss statement, signed and dated

Property Information;

- Most recent property tax bill
- Homeowner's Insurance declaration page

We look forward to serving your lending needs.

HOME EQUITY LOAN APPLICATION

PLEASE TYPE OR PRINT

IMPORTANT APPLICANT INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

TYPE OF ACCOUNT REQUESTED

Check one to indicate the type of account you are requesting. Note: Married applicants may apply for separate accounts.

- Joint Account - We intend to apply for joint credit. (initials) _____
- Individual Account - Relying solely on my income and assets.
- Individual Account - Relying on my income and assets as well as income or assets of another.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for "Race." The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations the lender is required to note ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

BORROWER <input type="checkbox"/> I do not wish to furnish this information.	CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information.
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

TERMS REQUESTED

Amount \$	Length of Account Term	Periodic Payment Date	Purpose
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COLLATERAL PROPERTY

Address	Year Built	Date Purchased	Present Value	Balance Owing
Title in Name(s) of:	Address of Title Holder		Name and Address of Mortgage Holder	
			Phone No.	Acct. No.

INDIVIDUAL APPLICANT INFORMATION

Name	Birthdate	Social Security No.	
Address	County	Drivers License No.	
Home Phone	Business Phone	Number of Dependents	Ages of Dependents
Employer/Self Employed	Position	Years Employed	Employer's Address
Previous Employer	Position	Years Employed	Previous Employer's Address
Name and Address of Applicant's Nearest Relative			Relationship
Wages, Salary, Commissions		How Often Paid	
Gross \$	/month	Net \$	/month
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered. Alimony, child support, separate maintenance received pursuant to: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding.			
Other Income: Source		Amount/Month	

Marital Status Married Separated Unmarried (includes single, divorced and widowed)

JOINT APPLICANT OR OTHER PARTY INFORMATION

Provide the information in this section if joint credit, or the individual applicant is relying on the income of others as a basis for repayment, or the individual applicant lives in a community property state or is relying on property located in a community property state as a basis for repayment of the credit requested.

Name	Birthdate	Social Security No.	
Address	County	Drivers License No.	
Home Phone	Business Phone	Number of Dependents	Ages of Dependents
Employer/Self Employed	Position	Years Employed	Employer's Address
Previous Employer	Position	Years Employed	Previous Employer's Address
Name and Address of Joint Applicant's or Other Party's Nearest Relative			Relationship
Wages, Salary, Commissions		How Often Paid	
Gross \$	/month	Net \$	/month
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered. Alimony, child support, separate maintenance received pursuant to: <input type="checkbox"/> Court Order <input type="checkbox"/> Written Agreement <input type="checkbox"/> Oral Understanding.			
Other Income: Source		Amount/Month	
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced and widowed)			

ASSET AND DEBT INFORMATION

If "Joint Applicant or Other Party Information" section was completed above, this section should be completed giving information about both the Applicant and the Joint Applicant or Other Party. Please identify the Applicant-related information with an "*"." Attach additional sheets if necessary.

ASSETS

DESCRIPTION OF ASSETS	NAME(S) OF OWNER(S)	SUBJECT TO DEBT: YES/NO	VALUE
Checking Account Number(s) (where)			\$
Savings Account Number(s) (where)			
Automobiles (Make, Model, Year)			
Marketable Securities (Issuer, Type, No. of Shares)			
Life Insurance (cash value)			
Other Real Estate (Location, when acquired)			
Other Assets (Describe)			
Total Assets			\$

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages and other obligations.)

CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT	PRESENT BALANCE	MONTHLY PAYMENTS
Landlord or Mortgage Holder on other Real Estate					
Auto Loan					
Auto Loan					
Credit or Charge Card					
Credit or Charge Card					
TOTAL DEBTS			\$	\$	\$

Credit References

1.	\$	Date Paid
2.	\$	Date Paid

GENERAL INFORMATION

If you or a joint applicant or other party answers "yes" to any of the following questions, please explain in the space provided.

Are you a guarantor or co-maker of any leases, contracts or debts? Yes No

Are there any suits or judgments pending against you? Yes No
(Include amount) _____

Have you been declared bankrupt in the last 10 years? Yes No

New York Residents: A consumer report may be ordered in connection with your application. Upon your request, we will inform you whether or not a report was ordered. If a report was ordered we will tell you the name and address of the consumer reporting agency that provided the report. Subsequent reports may be ordered or utilized in connection with an update, renewal or extension of credit for which you have applied.

Ohio Residents: The Ohio laws against discrimination require all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

I certify that everything I have stated in this application and on any attachments is correct. Lender may keep this application whether or not it is approved. By signing below I authorize Lender to check my credit and employment history and to answer questions others may ask Lender about my credit record with Lender. I understand that I must update this credit information at Lender's request and if my financial condition changes.

I acknowledge receipt of the Home Equity Brochure and the lender's Home Equity disclosure statement on today's date.

Applicant X _____ Date _____ Joint-Applicant X _____ Date _____

CREDITOR USE ONLY

This application was taken by: <input type="checkbox"/> face to face interview <input type="checkbox"/> mail <input type="checkbox"/> telephone <input type="checkbox"/> internet		
Date Application Received:	Received By:	Amount Requested \$
Approved By:	Approved By:	Amount Approved \$
Rescindable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Funding Date:	Initial Advance \$

Union Bank

Consent

I (We) hereby give my (our) consent to have Union Bank, successors, assignees and/or subsequent investors and servicers obtain any and all information regarding my (our) employment, checking, and/or savings accounts, credit obligations and all other credit matters which they may require in connection with my (our) application for a loan.

I understand that a consumer report prepared by a consumer reporting agency may be obtained at the time I apply for my account and, if my account is approved, at any time after that. I have the right at any time to ask Union Bank whether a report was obtained and, if so, to have Union Bank furnish me with the name and address of the consumer reporting agency that prepared the report.

THIS FORM MAY BE REPRODUCED AND THAT COPY SHALL BE AS EFFECTIVE AS THE ORIGINAL CONSENT WHICH I (WE) HAVE SIGNED.

This consent form is signed for the purpose of applying for individual or joint credit. (Check one)

Signature

Signature

I am (we are) aware that the assigned Credit Bureau may call me (us) to clarify information obtained in my (our) application or credit history (ies) in order to expedite the processing of the loan application. I (we) can be reached at the following telephone number(s) during the day.

Name: _____ (_____) _____ from _____ to _____

Name: _____ (_____) _____ from _____ to _____

PRIVACY NOTICE (Copies are available upon request or at <http://www.unionbankvt.com/UBPrivacy.html>)

Respecting and protecting customer privacy has always been vital to our business. While information is the cornerstone of our ability to provide superior service, our most important asset is our customers' trust. You have entrusted us not only with your finances, but also with your personal information. To protect and maintain this relationship, and to comply with FRB Regulation P effective July 1, 2001, we have adopted the following privacy principles.

Union Bank collects non-public personal information about you from the following sources: (1) Information you provide on applications and other forms; (2) Information about your transactions with us, our affiliates, or others, and (3) Information we receive from consumer reporting agencies.

Union Bank protects your information by restricting access to non-public personal information to employees who need that information to provide products and services to you. We maintain appropriate security safeguards and procedures regarding customer information, which includes the use of passwords and access codes to prevent revealing sensitive information to inappropriate or unauthorized sources.

We do not disclose any non-public personal information about our customers or former customers to anyone, except as permitted by law. This may include information we collect as described above, to companies that perform marketing services on our behalf or to other financial institutions with whom we have joint marketing agreements.

Union Bank asks its business partners to maintain the same privacy standards. When the Bank conducts business with third parties, it requires its vendors to maintain similar standards of conduct regarding the privacy of personally identifiable customer information provided to them.

Union Bank communicates its privacy principles to new customers when they open accounts and annually there-after. Customers will be notified in advance if there are any changes in the Bank's privacy principles.

Visitors to Union Bank's web site will remain anonymous. We do not collect personal identifying information about visitors to our site. If you access account information online via our NetTeller service, you must provide your NetTeller ID and individually selected PIN. Your PIN should never be shared with anyone and may be changed at your discretion. To provide you with the privacy and piece of mind you deserve, Union Bank has implemented proven encryption methods to transmit account information across the Internet. Please be advised that e-mail is not encrypted and sensitive information should not be sent via e-mail. Additionally, please be aware that the use of cell phones and portable phones is not a secure means for conducting bank business.

Union Bank strives to maintain the most up-to-date, complete and accurate customer and account information. If you have any questions, please call us at (802) 888-6600, or write to us at P.O. Box 667, Morrisville, VT 05661.

FOR BANK USE ONLY

I hereby certify this to be a true and exact copy of the original

Signature

Name/Title

YOUR BILLING RIGHTS

KEEP THIS NOTICE FOR FUTURE USE

This notice contains important information about your rights and our responsibilities under the Fair Credit Billing Act.

NOTIFY US IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR HOME EQUITY LINE OF CREDIT STATEMENT.

If you think your statement is wrong, or if you need more information about a transaction on your statement, write to us on a separate sheet at Union Bank, P.O. Box 667, Morrisville, VT 05661. Write to us as soon as possible. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- Describe the error and explain if you can, why you believe there is an error. If you need more information, describe the item you are not sure about.

If you have authorized us to pay your HELOC payment or balance automatically from your savings or checking account, you can stop the payment on any amount you think is wrong. To stop the payment your letter must reach us three business days before the automatic payment is scheduled to occur.

YOUR RIGHTS AND OUR RESPONSIBILITIES AFTER WE RECEIVE YOUR WRITTEN NOTICE

We must acknowledge your letter within **30** days, unless we have corrected the error by then. Within **90** days, we must either correct the error or explain why we believe the statement was correct.

After we receive your letter, we cannot try to collect any amount you question, or report you as delinquent. We can continue to bill you for the amount you question, including finance charges, and we can apply any unpaid amount against your credit limit. You do not have to pay any questioned amount while we are investigating, but you are still obligated to pay the parts of your statement that are not in question.

If we find that we made a mistake on your statement, you will not have to pay any finance charges related to any questioned amount. If we didn't make a mistake, you may have to pay finance charges, and you will have to make up any missed payments on the questioned amount. In either case, we will send you a statement of the amount you owe and the date that it is due.

If you fail to pay the amount that we determine you owe, we may report you as delinquent. However, if our explanation does not satisfy you and you write to us within ten days telling us that you still refuse to pay, we must tell anyone we report you to that you have a question about your statement. And, we must tell you the name of anyone we reported you to. We must tell anyone we report you to that the matter has been settled between us when it finally is.

If we don't follow these rules, we can't collect the first **\$50** on the questioned amount, even if your statement was correct.



ADDENDUM TO RESIDENTIAL MORTGAGE LOAN APPLICATION

Can anyone, other than you, claim a homestead interest* in the property that will secure repayment of the loan?

NO YES

If yes, who may be able to claim a homestead interest?

Name

Dated this _____ day of _____, 20_____.

Borrower

Co-Borrower

*Vermont law recognizes a homestead right in the spouse or civil union partner of the legal owner of real estate, which is used or kept as their primary home, even if the spouse or civil union partner is not a co-owner of that home. This homestead interest prevents creditors from attaching the entire homestead property without the written consent of both spouses or partners. Therefore, the lender will require that both spouses or civil union partners sign the mortgage deed, or otherwise waive their homestead interest in the property, in order to insure that it is fully enforceable.

This Addendum has been prepared in response to Act 91 of the 2000 Legislative Session, effective July 1, 2000, which provides that parties to a civil union shall have all the same benefits, protections, and responsibilities afforded under Vermont law to spouses in a marriage.

You should consult an attorney for specific legal advice regarding homestead rights and for specific legal advice regarding benefits, protections, and responsibilities under Act 91.

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. **FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:**

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

.....
Consumer Date

.....
Consumer Date