



mortgage application

Please print out and complete the following application, have the applicant(s)' signature(s) notarized, and mail along with a copy of a valid picture ID of each account applicant to:

MidFirst Mortgage Center
 c/o Online Forms
 3600 Towne Blvd.
 Franklin, Ohio 45005

USA Patriot Act information: To help fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account, including joint owners.

Notice to Ohio applicants: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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.

We do business in accordance with the Federal Fair Housing Law and the Equal Credit Opportunity Act.



Primary Member Name	Date
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Primary Member Information	
MidFirst Account Number	Social Security Number
Street Address	City, State, ZIP
Home Phone ()	Work Phone ()
Date of Birth	Ages of Dependents (not including ones for which you pay support)

Income Information	
Occupation or Title	
Employer	Employed Since
Employer Address	City, State, ZIP
Work Phone / Extension ()	Gross Income \$ <input type="checkbox"/> per hour <input type="checkbox"/> per week <input type="checkbox"/> per month <input type="checkbox"/> per year
Previous Employer Name and Address (if with current employer less than 2 years)	Years Employed
Source of Other Income, If Any (Please note: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.)	Amount of Other Income \$ <input type="checkbox"/> per hour <input type="checkbox"/> per week <input type="checkbox"/> per month <input type="checkbox"/> per year

Assets and Expenses Information	
Total Savings in Institutions Other than MidFirst \$	
Monthly Housing Payment <input type="checkbox"/> buying home <input type="checkbox"/> renting \$ <input type="checkbox"/> buying mobile home <input type="checkbox"/> c/o family	If buying home: Balance Owing Estimated Value \$ \$ \$
Vehicle: Year Make Model Where Financed	
Other Major Assets (vehicles, stocks, bonds, etc.)	Amount of Child Support or Alimony Paid \$ <input type="checkbox"/> per week <input type="checkbox"/> per month

coapplicant information

(complete this page only if applying for joint credit)

Personal Information	
Name	Relationship to Applicant
MidFirst Account Number	Social Security Number
Street Address	City, State, ZIP
Home Phone ()	Work Phone ()
Date of Birth	Ages of Dependents (not including ones for which you pay support)

Income Information	
Employer	Occupation or Title
Employer Address	Employed Since
Work Phone / Extension ()	City, State, ZIP
Previous Employer Name and Address (if with current employer less than 2 years)	Gross Income \$
	<input type="checkbox"/> per hour <input type="checkbox"/> per week <input type="checkbox"/> per month <input type="checkbox"/> per year
	Years Employed
Source of Other Income, If Any (Please note: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.)	Amount of Other Income \$
	<input type="checkbox"/> per hour <input type="checkbox"/> per week <input type="checkbox"/> per month <input type="checkbox"/> per year

Assets and Expenses Information	
Monthly Housing Payment \$	Total Savings in Institutions Other than MidFirst \$
<input type="checkbox"/> buying home <input type="checkbox"/> renting <input type="checkbox"/> buying mobile home <input type="checkbox"/> c/o family	If buying home: Balance Owing Estimated Value \$ \$ \$
Vehicle: Year Make Model Where Financed	
Other Major Assets (vehicles, stocks, bonds, etc.)	Amount of Child Support or Alimony Paid \$
	<input type="checkbox"/> per week <input type="checkbox"/> per month

Personal Reference	
Address	Nearest Relative Not Living With You
Daytime Phone ()	City, State, ZIP
	Evening Phone ()

Your Signature

By signing below, you certify that everything you have stated in this application is correct to the best of your knowledge. You authorize MidFirst Financial Services, LLC to obtain credit reports in connection with this application and for any update, renewal, or extension of the credit received. If you request, MidFirst Financial Services, LLC will tell you the name and address of any credit bureau from which it received a credit report on you.

Signature _____

Date _____