



Westwater Financial, Inc

8979 Conde Ln., Suite A

Windsor, CA 95492

(707) 419-3070

CONSUMER CREDIT LOANS

QUALIFICATIONS:

Applicants must be 18 years of age.

Loan applicant must be an enrolled tribal member of the Dry Creek Rancheria Band of Pomo Indians, a member of other Native American/Alaska Natives who reside in our service area (Sonoma, Mendocino, and Lake Counties), Non-Native Americans who are tribal employees, and Non-Native Americans who are DCR tribal family members and reside in our service area.

LOAN AMOUNT:

You may request any amount from **\$500** up to **\$5,000**.

TERMS:

1. Maximum repayment terms range from **6 to 36 months**.
2. Interest rate will be fixed at **10%** (e.g. on a \$1,000 note for one year the interest charge would be approximately \$55, interest rate subject to change) or **8%** if secured and paid by Per Capita Payments .
3. A Loan fee of **\$50.00** will be charged. Other costs incurred by Westwater in connection with loan processing/Security Perfection Arrangements (i.e., credit reports, recording, filing, appraisal fees, etc.) may also apply.

APPLICATION:

1. Loan applicant must complete ALL of the boxes on the enclosed application.
2. List all "assets & liabilities". This includes all types of payments made on a monthly basis.
3. Sign and date the application.
4. Include a copy of your tribal enrollment card.
5. Fill out the Automatic ACH Authorization (attach a voided check) or a Per Capita Payment Agreement, as applicable.

VERIFICATION:

1. Tribal Enrollment may be verified through tribal rolls.

PROCESSING:

1. Return all information to the Westwater Financial, Inc. We will review your request and notify you of a decision within 30 days of receipt of application.

Any questions, please call (707) 419-3070.

CONSUMER CREDIT APPLICATION

SECTION A: INDIVIDUAL/JOINT APPLICANT INFORMATION

NAME/S (Last, First, Middle)

Ethnicity: Caucasian Hispanic/Latino African American
 Asian/Other Pacific Islander Native American

If Native American, what is your tribal affiliation?

The information you provide is confidential and is used for funding purposes and to better serve our clients. The above information is requested by the Federal Government for certain types of loans, in order to monitor the lender's compliance with equal credit opportunity. You are not required to furnish this information, but are encouraged to do so. A lender may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations, this lender is required to note race/ethnicity on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below.

I do not wish to furnish this information

PURPOSE OF LOAN	LOAN AMOUNT REQUESTED: \$
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INDIVIDUAL or JOINT APPLICATION (Name/s):

BIRTHDATE	TELEPHONE NO.	DRIVER'S LICENSE	SOCIAL SECURITY NO.	NO. OF DEPENDANTS	AGES OF DEPENDENTS
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ADDRESS (Street, City, State, Zip Code)	COUNTY	Do you or	Own Rent?	HOW LONG
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PREVIOUS ADDRESS (Street, City, State, Zip Code)	COUNTY	Did you or	Own Rent?	HOW LONG
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EMPLOYER (Company name and address)	DEPARTMENT	SUPERVISOR:	CONTACT #-SUPERVISOR	HOW LONG
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BUSINESS PHONE	Ext.	POSITION OR TITLE	SALARY PER MONTH	
			Gross \$	Net \$

PREVIOUS EMPLOYER (Company name and address)	HIRE DATE
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NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	TELEPHONE NO. (include area code)
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NAME AND ADDRESS OF NEAREST RELATIVE / FRIEND NOT LIVING WITH YOU	RELATIONSHIP	TELEPHONE NO. (include area code)
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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.

Alimony, child support, separate maintenance received under	<input type="checkbox"/>	Court Order	<input type="checkbox"/>	Written Agreement	<input type="checkbox"/>	Oral Understanding
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OTHER INCOME (Employment, SSI, Per Capita, etc....Please describe)	AMOUNT PER MONTH
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SPOUSAL/COBORROWER INCOME (EMPLOYER NAME ADDRESS, PHONE NUMBER)	AMOUNT PER MONTH
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Is any income listed in this Section likely to be reduced before the credit request is paid off?	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes (Explain)		Have you previously received credit from us?	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes – when?
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SECTION B: ASSETS

DESCRIPTION OF ASSETS	NAME/S IN WHICH ACCOUNT IS CARRIED	SUBJECT TO DEBT?	Value \$
CHECKING ACCOUNT NUMBER(S) <i>(INSTITUTION NAME)</i>			
SAVINGS ACCOUNT NUMBER(S) <i>(INSTITUTION NAME)</i>			
CERTIFICATE OF DEPOSIT(S) <i>(INSTITUTION NAME)</i>			
MARKETABLE SECURITIES <i>(Issuer, type, no. of shares)</i>			
REAL ESTATE <i>(location, date acquired)</i>			
LIFE INSURANCE – Issuer/Face Value:			

