

# INSURANCE DISCLOSURE FOR CREDIT APPLICATION

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**Applicant:**

**Lender:**

FIRST STATE BANK OF CANDO  
415 MAIN STREET BOX 429  
CANDO, ND 58324  
(701) 968-3331

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## IMPORTANT

**DO NOT SIGN THIS FORM UNTIL YOU CAREFULLY  
READ IT AND UNDERSTAND ITS CONTENT**

### Purpose.

You have submitted an application for a loan. In connection with your loan application, Lender may be soliciting, offering to sell, or will sell you an insurance product or annuity. Federal law requires Lender to provide you with the following disclosures.

### Credit Disclosures.

1. Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from Lender or any of its affiliates.
2. Lender, as a condition of granting you a loan, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.

### Acknowledgment.

**BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.**

**APPLICANT:**

X

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date



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Applicant

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Date

