



Amount of Credit Requested: \_\_\_\_\_

Checking Account Number: \_\_\_\_\_

Applicant			Co-Applicant/Cosigner		
Name (First, Middle, Last)			Name (First, Middle, Last)		
Street Address		City, State, Zip	Street Address		City, State, Zip
Home Telephone	Mobile Telephone	# of Years There	Home Telephone	Mobile Telephone	# of Years There
Social Security #	Date of Birth	# of Dependents	Social Security #	Date of Birth	# of Dependents
Housing Status <input type="checkbox"/> Renting (Landlord's Name) _____ <input type="checkbox"/> Lives with Relatives <input type="checkbox"/> Buying (Mortgage Holder) _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Home Paid For _____			Housing Status <input type="checkbox"/> Renting (Landlord's Name) _____ <input type="checkbox"/> Lives with Relatives <input type="checkbox"/> Buying (Mortgage Holder) _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Home Paid For _____		
Monthly Mtg/Rent Pmt	Mortgage Balance	Value of Home	Monthly Mtg/Rent Pmt	Mortgage Balance	Value of Home
Previous Street Address		# of Years There	Previous Street Address		# of Years There
Employer		Telephone Number	Employer		Telephone Number
Employer's Street Address		City, State, Zip	Employer's Street Address		City, State, Zip
Occupation		# of Years There	Occupation		# of Years There
Previous Employer	Occupation	Telephone Number	Previous Employer	Occupation	Telephone Number
Name of Nearest Relative Not Living With You		Relationship	Name of Nearest Relative Not Living With You		Relationship
Address		Telephone Number	Address		Telephone Number

Annual Gross Income		Annual Gross Income	
Regular Earnings/Self Employed (annualized)	\$ _____	Regular Earnings/Self Employed (annualized)	\$ _____
Overtime Bonus	\$ _____	Overtime Bonus	\$ _____
Interest/Dividends	\$ _____	Interest/Dividends	\$ _____
Other (Describe) _____ <small>(Alimony, child support, or maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)</small>	\$ _____	Other (Describe) _____ <small>(Alimony, child support, or maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)</small>	\$ _____
<b>Total \$</b>	<input type="text"/>	<b>Total \$</b>	<input type="text"/>

General			
1. Have you or has your co-applicant/cosigner ever been granted credit under any other name(s)? If yes give name(s). _____	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	3. Are you or is your co-applicant/cosigner a permanent resident alien?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you or is your co-applicant/cosigner a citizen of the United States?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	4. Are you or your co-applicant/cosigner currently a debtor in a bankruptcy proceeding?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No
		5. Are you or is your co-applicant/cosigner a Director, Executive Officer, or owner of more than 10% of the voting shares of Eastern Savings Bank, fsb?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No

Everything stated in this application is correct to the best of my knowledge. I agree that all documents and information I have furnished to you belong to you. You are authorized to verify and re-verify any information contained in this application at any time, either directly or through a credit reporting agency, and from any source. Except as otherwise prohibited by applicable law, you may furnish to any of your subsidiaries any information and documents relating to me or my account(s) with you. You may also respond to credit inquiries from third parties regarding my account(s) with you. If credit is approved, I agree by signing below to abide by the Agreement and Disclosure governing this account and acknowledge receipt of the Agreement and Disclosure as the same may be amended from time to time and which constitutes the agreement. If I am a Cosigner, I also acknowledge receipt of a Notice to Cosigner. I also agree that you may take any money or property I have deposited with you to offset against any amounts I owe you under this Account. I acknowledge this agreement may not be amended except in writing. By signing below, I acknowledge receipt of the EasternEase Overdraft Line of Credit Agreement and Disclosure ("Agreement and Disclosure").

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Cosigner's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Branch Use Only Received By \_\_\_\_\_ Date Received \_\_\_\_\_ Operations Use Only Received By \_\_\_\_\_ (Forward to Mgmt for Review)



INTEREST RATES AND INTEREST CHARGES	
Annual Percentage Rate (APR) For Loans	<b>17.99%</b>
Paying Interest	You will be charged interest from the transaction date

  

FEES	
Annual Fee	\$0
Transaction Fees <ul style="list-style-type: none"> <li>• Advance Fee</li> </ul>	\$6 for each day of an advance Advances in \$25 increments
Penalty Fees <ul style="list-style-type: none"> <li>• Late Payment</li> <li>• Returned Payment/Check</li> <li>• Over the Credit Limit</li> </ul>	\$10 \$25 \$25

**How We Will Calculate Your Balance:** We use a method called “daily balance.” See your account agreement for details.

**Billing Rights:** Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

## EasternEase Credit Line Agreement (Overdraft Protection)

**AGREEMENT:** Your rights concerning this Account are established by this Agreement. You represent that the EasternEase Credit Line Application (Application) is complete and that the information provided is true and correct and may be relied upon by us.

**DEFINITIONS:** In this Agreement, the following terms have the meaning set forth below.

1. “We”, “us”, “our” and “ours” and “Eastern” mean Eastern Savings Bank, fsb, 11350 McCormick Road, Executive Plaza 2, Suite 200, Hunt Valley, Maryland 20131.
2. “You” and “Your” mean anyone who is an account holder of an Eastern Checking Account, which is supplemented by this Overdraft Line of Credit.
3. “Your Account” means the Checking Account Overdraft Line of Credit described herein.
4. “Loan” means any amount of credit obtained under Your Account.
5. “Your Credit Limit” means any amount set by us as the credit limit for Your Account.
6. “Billing Period” means any period of approximately a month at the end of which we compute the amount to be billed under Your Account.
7. “Checking Account” means the Checking Account linked to Your Account.

**USING YOUR OVERDRAFT CHECKING ACCOUNT:** If we approve your Application, you will receive an overdraft loan (Your Account) that will allow you to obtain loans using your Checking account and a special line of credit. Your credit line will be activated whenever (1) a check or ACH transaction (e.g., online bill pay, automatic payment) is received for payment in an amount more than the available balance in your Checking Account, (2) any other amount is sought to be withdrawn from the Checking Account (for example, by a check or to pay a service charge or other fee charged against the Checking Account) but the amount sought to be withdrawn exceeds the balance available for withdrawal, or (3) any transfer or other transaction made or attempted to be made by any means results in a transfer or transaction in an amount in excess of the balance available for withdrawal from your Checking Account. NOTE, although Your Account balance is generally not considered in determining the availability of funds for a debit card transaction,

if an approved debit card transaction causes a negative balance in the Checking Account at the time of settlement, this will activate your credit line. Since all loans are made in increments of \$25, a loan request for an uneven amount will be rounded to the next higher \$25. We will then charge the loan against your Account. Each loan that is added to Your Account is combined with any unpaid loan balance to become one consolidated loan.

**OBTAINING CREDIT:** You may obtain loans up to the amount of Your Credit Limit subject to the conditions described in this Agreement. Your Credit Limit will be given to you in writing and will be displayed on your monthly statement thereafter. We may change Your Credit Limit at any time and will notify you if we do. You may request loans by using your Checking account for any lawful purpose up to the amount of the available credit shown on your monthly statement. We may deny your request for a loan if you are in default under this or any other credit agreement, if your financial condition adversely changes, if Your Credit Limit would thereby be exceeded, or if your right to obtain further advances has been terminated. You authorize us to obtain a consumer credit report in connection with our evaluation of this application and at any time in the future. We may contact your employer or take other appropriate action to verify your credit and employment history. You agree to supply us with additional credit information upon request. You agree that we may provide information about your Account to consumer reporting agencies, to any of our subsidiaries or affiliates, or as otherwise required by law. You must notify us if you file for bankruptcy or if your financial situation significantly changes for the worse from the time you obtained your initial advance.

**YOUR CREDIT LIMIT:** Your Credit Limit is shown on each monthly statement. You promise not to exceed Your Credit Limit. If you request a loan that exceeds Your Credit Limit, we may at our option:

- honor the presented item or withdrawal request and add the loan to the unpaid balance without permanently raising your credit limit
- honor the presented item or withdrawal request and demand that you repay that amount immediately
- refuse to honor the presented item or withdrawal request. You also understand that the amount of your available credit may be reduced by any Finance Charges, fees or other charges you owe.

If you exceed your Credit Limit, you agree to pay a fee of \$25.

**PROMISE TO PAY:** You promise to pay us or anyone we designate, at the address on your monthly statement, in United States dollars, the amount of all credit you obtain and any other charges we make against Your Account (as described in this Agreement), and Finance Charges (as described in the "Finance Charge" section below).

**PAYMENTS:** On or before the payment date shown on your monthly statement ("the Due Date") you must pay at least the Minimum Payment shown thereon. The Minimum Payment will be equal to:

- the greater of 3% of Your Account balance shown on the monthly statement or \$25 plus
- any amount by which Your Account balance exceeds Your Credit Limit.

But in no event will the Minimum Payment be greater than the Account balance. You may pay more than the Minimum Payment or pay your Account in full at any time without penalty.

If we do not collect at least your Minimum Payment within fifteen days after the Payment Due Date, you agree to pay a late charge of \$10. If a payment is returned or dishonored, you agree to pay a fee of \$25.

**AUTOMATIC PAYMENTS:** You authorize us to deduct your Minimum Payment from the Checking Account if not paid by the due date. You will keep enough funds in the Checking Account to cover the payment.

**APPLICATION OF PAYMENTS:** We will apply any payment posted to Your Account during any Billing Period to Your Account balance at the beginning of the Billing Period in the following order: First to any charges you owe other than principal or Finance Charges, then to Finance Charges that are due, then to principal.

**FINANCE CHARGE:** A Finance Charge is always imposed on Your Account from the date each loan is made until the loan is repaid in full. There is no grace period. We calculate the Finance Charge on your Account using the daily balance method (including new transactions) which is computed as follows: The Daily Balance (see description below) of your Account on each day of the Billing Period will be multiplied by the Daily Periodic Rate to determine the Daily Finance Charge. The Daily Periodic Rate is .04929% which corresponds to an Annual Percentage Rate of 17.99%. The Daily Balance is the principal balance in the Account each day, and it is calculated by taking the beginning balance of your Account each day and adding any new advances, then subtracting any payments or credits against your Account. The Daily Finance Charge for each day in the Billing Period will be totaled at the end of the Billing Period to determine the Finance Charge you will owe for the Billing Period.

**DEFAULT AND REMEDIES:** You will be in default, and we can require immediate payment of all or any part of the amounts you owe if: (1) there are not sufficient funds in your Checking account to make any required payment by the Due Date; (2) your total balance exceeds Your Credit Limit; (3) you fail to abide by any other term of the Agreement; (4) the financial information that you supply is materially incorrect or misleading; (5) you choose to close out your Checking account with us; or (6) you become legally incompetent or deceased. If you default, we can require you to pay collection and court costs we incur in an arbitration or court collection proceeding and reasonable attorney's fees of up to 15% of the amount owed or any other amount, as may be allowed by law.

We can set off and apply to Your Account balance any credit we owe you or any money or property on deposit with us or otherwise in our possession.

**ARBITRATION:** PLEASE READ THIS PROVISION OF THE AGREEMENT CAREFULLY. IT PROVIDES THAT EITHER YOU OR WE CAN REQUIRE THAT ANY CONTROVERSY OR DISPUTE BE RESOLVED BY BINDING ARBITRATION. ARBITRATION REPLACES THE RIGHT TO GO TO COURT, INCLUDING THE RIGHT TO A JURY AND THE RIGHT TO PARTICIPATE IN A CLASS ACTION OR SIMILAR PROCEEDING. IN ARBITRATION, A DISPUTE IS RESOLVED BY A NEUTRAL ARBITRATOR INSTEAD OF A JUDGE OR JURY. ARBITRATION PROCEDURES ARE SIMPLER AND MORE LIMITED THAN RULES APPLICABLE IN COURT.

**Agreement to Arbitrate:** You agree that either you or we may, without the other's consent, require that any controversy or dispute between you and us (all of which are called "Claims"), be submitted to mandatory, binding arbitration. This arbitration provision is made pursuant to a transaction involving interstate commerce, and shall be governed by and enforceable under the Federal Arbitration Act (the "FAA"), 9 U.S.C. §1 et seq., and (to the extent State law is applicable), the State law governing the Agreement.

**Claims Covered:** Claims subject to arbitration include, but are not limited to: disputes relating to the establishment, terms, treatment, operation, handling, limitations on, or termination of Your Account; any disclosures or other documents or communications relating to Your Account; any transactions or attempted transactions involving Your Account, whether authorized or not; billing, billing errors, credit reporting, the posting of transactions, payments or credits, or collection matters relating to Your Account; services or benefits programs relating to Your Account, whether or not they are offered, introduced, sold, or provided by us; advertisements, promotions, or oral or written statements related to (or preceding the opening of) Your Account; goods or services financed under Your Account, or the terms of financing; the application, enforceability, or interpretation of this Agreement, including this arbitration provision; and any other matters relating to Your Account, a prior related account, or the resulting relationships between you and us. Any questions about what Claims are subject to arbitration shall be resolved by interpreting this arbitration provision in the broadest way the law will allow it to be enforced.

Claims subject to arbitration include not only Claims made directly by you, but also Claims made by anyone connected with you or claiming through you such as a co-applicant or authorized user of your Account, your agent, representative or heirs, or a trustee in bankruptcy. Similarly, Claims subject to arbitration include not only Claims that relate directly to us, a parent company, subsidiary company, affiliated company, and any predecessors and successors (and the employees, officers, and directors of all of these entities), but also Claims for which we may be directly or indirectly liable, even if we are not properly named at the time the Claim is made.

Claims subject to arbitration include Claims based on any theory of law, any contract statute, regulation, ordinance, tort (including fraud or any intentional tort), common law, constitutional provision, respondeat superior, agency or other doctrine concerning liability for other persons, customer or course of dealing, or any other legal or equitable ground (including any claim for injunctive or declaratory relief). Claims subject to arbitration include Claims based on any allegations of fact, including an alleged act, inaction, omission, suppression, representation, statement, obligation, duty, right, condition, status, or relationship.

Claims subject to arbitration include Claims that arose in the past or arise in the present or future. Claims are subject to arbitration whether they are made independently or with other Claims in proceedings involving you, us, or others. Claims subject to arbitration include Claims that are made as counterclaims, cross-claims, third-party claims, interpleaders or otherwise, and a party who initiates a proceeding in court may elect arbitration with respect to any Claim(s) advanced in the lawsuit by any other party or parties. Claims subject to arbitration include Claims made as part of a class action or other representative action, and the arbitration of such Claims must proceed on an individual (non-class, non-representative) basis.

If you or we require arbitration of a particular Claim, neither you, we, nor any other person may pursue the Claim in any litigation, whether as a class action, private attorney general action, other representative action, or otherwise.

Claims are not subject to arbitration if they are filed by you or us in a small claims court, so long as the matter remains in such court and advances only an individual (non-class, non-representative) Claim.

**Initiation of Arbitration:** The party filing an arbitration must choose one of the following two arbitration administrators: (1) American Arbitration Association; or (2) JAMS. These administrators are independent from us and you, and we must follow their rules and procedures for initiating and pursuing an arbitration. If you initiate the arbitration, you must also notify us in writing at:

Eastern Savings Bank  
Executive Plaza 2  
11350 McCormick Road, Suite 200  
Hunt Valley, Maryland 21031  
Attention: General Counsel

If we initiate the arbitration, we will notify you in writing at your current address on file with us or (if your Account is closed) the last address at which we contacted you. Any arbitration hearing that you attend will be held at a place chosen by the arbitrator or arbitration administrator in the same city as the U.S. District Court closest to your then current address, or at some other place to which you and we agree in writing. You may obtain copies of the current rules of each of the two arbitration administrators named above, and other related materials, including

forms and instructions for initiating an arbitration, by contacting the arbitration administrators as follows:

American Arbitration Association  
120 Broadway, Floor 21  
New York, NY 10271  
Web site: www.adr.org

JAMS  
18881 Von Karman Ave. Suite 350  
Irvine, CA 92612  
Web site: www.jamsadr.com

**Procedures and Law Applicable in Arbitration:** A single, neutral arbitrator will resolve Claims. The arbitrator will either be a lawyer with at least ten years experience or a retired or former judge. The arbitrator will be selected in accordance with the rules of the arbitration administrator. The arbitration will be conducted under the applicable procedures and rules of the arbitration administrator that are in effect on the date the arbitration is filed, unless this arbitration provision is inconsistent with those procedures and rules, in which case this Agreement will prevail. These procedures and rules may limit the amount of discovery available to you or us. The arbitrator will apply applicable substantive law consistent with the FAA and applicable statutes of limitations and will honor Claims of privilege recognized by law. You may choose to have a hearing and be represented by counsel. The arbitrator will take reasonable steps to protect customer account information and other confidential information, including the use of protective orders to prohibit disclosure outside the arbitration, if requested to do so by you or us. The arbitrator will have the power to award to a party any damages or other relief provided for under applicable law and will not have the power to award relief to, against, or for the benefit of any person who is not a party to the proceeding. The arbitrator will make any award in writing but need not provide a statement of reasons unless requested by a party. Upon a request by you or us, the arbitrator will provide a brief statement of the reasons for the award.

**Costs:** If we file the arbitration, we will pay the initial filing fee. If you file the arbitration, you will pay the initial filing fee unless you seek and qualify for a fee waiver under the applicable rules of the arbitration administrator. We will reimburse you for the initial filing fee if you paid it and you prevail. If there is a hearing, we will pay any fees of the arbitrator and arbitration administrator for the first day of that hearing. All other fees will be allocated in keeping with the rules of the arbitration administrator and applicable law. However, we will advance or reimburse filing fees and other fees if the arbitration administrator or arbitrator determines there is good reason for requiring us to do so, or you ask us and we determine there is good cause for doing so. Each party will bear the expense of that party's attorneys, experts, witnesses, and other expenses, regardless of which party prevails, except that the arbitrator shall apply any applicable law in determining whether a party should recover any or all expenses from another party.

**No Consolidation or Joinder of Parties:** All parties to the arbitration must be individually named. Claims by persons other than individually named parties shall not be raised or determined. Notwithstanding anything else that may be in this arbitration provision or Agreement, no class action, private attorney general action, or other representative action may be pursued in arbitration, nor may such action be pursued in court if any party has elected arbitration. Unless consented to by all parties to the arbitration, Claims of two or more persons may not be joined, consolidated, or otherwise brought together in the same arbitration (unless those persons are applicants, co-applicants or authorized users on a single account and/or related accounts or parties to a single transaction or related transactions). This is so whether or not the Claims (or any interest in the Claims) may have been assigned.

**Enforcement, Finality, Appeals:** You or we may bring an action, including a summary or expedited motion, to compel arbitration of Claims subject to arbitration, or to stay the litigation of any Claims pending arbitration, in any court having jurisdiction. Such action may be brought at any time, even if any such Claims are part of a lawsuit, unless a trial has begun or a final judgment has been entered. Failure or forbearance to enforce this arbitration provision at any particular time, or in connection with any particular Claims, will not constitute a waiver of any rights to require arbitration at a later time or in connection with any other Claims. Any additional or different agreement between you and us regarding arbitration must be in writing.

**Severability, Survival: This arbitration provision shall survive:** (1) termination or changes in the Agreement, the Account, and the relationship between you and us concerning the Account; (2) the bankruptcy of any party; and (3) any transfer or assignment of your Account, or any amounts owed on your Account, to any other person. If any portion of this arbitration provision is deemed invalid or unenforceable, the remaining portions shall nevertheless remain in force.

**TERMINATION:** We may terminate your Account as to future advances at any time upon written notice to you. After termination, Finance Charges will continue to accrue, and you will remain liable for payment under the terms of this Agreement until the outstanding balance is paid in full.

We may suspend or terminate your right to obtain additional loans at any time for any reason. If at any time you wish to terminate your line of credit, you need only send us a written statement to that effect. Termination by any one borrower terminates the line of credit for all borrowers. The termination will be effective upon our acknowledgement that your request has been received. Your obligations under this Agreement continue after this right is terminated.

**PRIVACY/DISCLOSURE OF ACCOUNT INFORMATION TO THIRD PARTIES:** In order to facilitate the opening, maintenance, processing, transfer, servicing, closing, and collection of Your Account, transfers, and transactions, you hereby authorize and consent to the disclosure by the Bank, its successors and assigns, to third parties of any information about Your Account, transfers, and the transactions you make:

1. When it is necessary to effect, administer, or enforce a requested transaction
2. In order to verify the existence and the condition of Your Account for a third party, such as a credit bureau or merchant
3. In order to comply with lawful summonses and requests from government agencies or court orders
4. To any subsidiary or affiliate
5. If you request, authorize, or give us written permission
6. As otherwise permitted or required by the Bank's Rules or Agreements governing particular services or by law or regulations
7. In order to protect against any suspicion of fraudulent or criminal activities
8. In the event of any litigation, arbitration, mediation, or administrative proceedings
9. When another party performs necessary services in connection with the processing, closing, servicing, or collection of the transaction

This consent shall apply both prospectively and retroactively to any disclosures made prior to the execution of this document to any of the third parties enumerated above. Applicable laws, regulations, or judicial decisions may permit or authorize disclosure of information to various parties and/or for various purposes not enumerated above. Nothing in this consent form shall be construed to restrict in any fashion such otherwise legally permissible disclosures.

**GENERAL:** This Agreement is made in Maryland. It is governed by federal law and any applicable Maryland law, including the Annotated Code of Maryland, Commercial Law Article, Subtitle 9 of Title 12.

Time is of the essence. If any part of this Agreement is held invalid, or unenforceable under any statute, court decision, rule, or regulation, the rest shall remain effective. If property is or will be security for another debt you owe us and under terms of that debt the property would secure amounts you owe under this Agreement, we may waive the right to treat the property as security for amounts you owe under this Agreement. All persons who use this Account are individually and jointly responsible for all indebtedness. Our rights under this Agreement are cumulative. No waiver of our rights is effective unless in writing. No written waiver with respect to a default will apply to any later default. Our failure to exercise or our delay in exercising any right or remedy, or our acceptance of a late or partial payment, with or without a late charge, will not constitute a waiver of any right or remedy.

**AMENDMENTS:** We may amend this Agreement by notifying you of the amendment in accordance with federal and applicable Maryland law. We may notify you that the rate of Finance Charge, the Annual Percentage Rate, and the Minimum Payment that will apply to your Account will be changed. You will not be required to pay the higher rate of Finance Charge, Annual Percentage Rate, or the higher Minimum Payment unless you agree to these changes in writing, request a new loan, or otherwise use the Account after a date stated in our notice. If you agree in writing or use the Account after the effective date of the amendment, the amended Agreement, including the higher or lower rate of Finance Charge and

Annual Percentage Rate, will apply to the entire unpaid balance, including the balance existing before the amendment became effective.

**DEATH OF AN OBLIGOR:** Upon the death of any obligor, we may terminate any further right to Loans from Your Account and require You to pay any outstanding balance immediately. If there remains a surviving joint obligor who is also an account holder of the Checking Account, we may, but are not obligated to, allow Your Account to remain open and available for future Loans. The removal of the name of a deceased obligor from any statement or notice shall not be deemed or construed to be a forgiveness or waiver of any obligation of that obligor or obligor's estate.

**MILITARY LENDING ACT:** Federal law provides important protections to members of the Armed Forces and their dependents relating to extensions of consumer credit. In general, the cost of consumer credit to a member of the Armed Forces and his or her dependent may not exceed an annual percentage rate of 36 percent. This rate must include, as applicable to the credit transaction or account: The costs associated with credit insurance premiums; fees for ancillary products sold in connection with the credit transaction; any application fee charged (other than certain application fees for specified credit transactions or accounts); and any participation fee charged (other than certain participation fees for a credit card account). To obtain this information orally, please call toll free 866-445-5210.

Notwithstanding any other provision of this Agreement, if you are a "covered borrower" under the Military Lending Act, as defined in 32 CFR §232.3(g), nothing in this Agreement shall be construed as applying to you or Your Account to the extent inconsistent with the Military Lending Act. Without limiting the foregoing, if you are a "covered borrower," no Advance Fee will be imposed and you will not be required to submit to arbitration.

**YOUR BILLING RIGHTS**  
**Keep This Document For Future Use**

This notice tells you about your rights and our responsibilities under the Fair Credit Billing Act.

**What To Do If You Find A Mistake On Your Statement:** If you think there is an error on your statement or if you need more information about a transaction on your statement, write to us on a separate sheet (do not use a payment voucher) at:

Eastern Savings Bank  
Executive Plaza 2  
11350 McCormick Road, Suite 200  
Hunt Valley, MD 21031  
Attention: Savings Administration

In your letter, give us the following information:

- **Account information:** Your name and Account number
- **Dollar amount:** The dollar amount of the suspected error
- **Description of problem:** If you think there is an error on your statement, describe what you believe is wrong and why you believe it is a mistake.

You must contact us:

- Within 60 days after the error appeared on your statement.
- At least 3 business days before an automated payment is scheduled, if you want to stop payment on the amount you think is wrong.

You must notify us of any potential errors *in writing*. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

1. Within 30 days of receiving your letter, we must tell you that we received your letter. We will also tell you if we have already corrected the error.
2. Within 90 days of receiving your letter, we must either correct the error or explain to you why we believe the statement is correct.

While we investigate whether or not there has been an error:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

After we finish our investigation, one of two things will happen:

- If we made a mistake: You will not have to pay the amount in question or any interest or other fees related to that amount.
- If we do not believe there was a mistake: You will have to pay the amount in question, along with applicable interest and fees. We will send you a statement of the amount you owe and the date payment is due. We may then report you as delinquent if you do not pay the amount we think you owe.

If you receive our explanation but still believe your bill is wrong, you must write to us within *10 days* telling us that you still refuse to pay. If you do so, we cannot report you as delinquent without also reporting that you are questioning your bill. We must tell you the name of anyone to whom we reported you as delinquent, and we must let those organizations know when the matter has been settled between us.

If we do not follow all of the rules above, you do not have to pay the first \$50 of the amount you question even if your bill is correct.

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Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE TO COSIGNER:** YOU ARE BEING ASKED TO GUARANTEE THIS DEBT. THINK CAREFULLY BEFORE YOU DO. IF THE BORROWER DOES NOT PAY THE DEBT, YOU WILL HAVE TO BE SURE YOU CAN AFFORD TO PAY IF YOU HAVE TO AND THAT YOU WANT TO ACCEPT THIS RESPONSIBILITY.

YOU MAY HAVE TO PAY UP TO THE FULL AMOUNT OF THE DEBT IF THE BORROWER DOES NOT PAY. YOU MAY ALSO HAVE TO PAY LATE FEES AND COLLECTION COSTS WHICH INCREASE THIS AMOUNT.

THE BANK CAN COLLECT THIS DEBT FROM YOU WITHOUT FIRST TRYING TO COLLECT FROM THE BORROWER. THE BANK CAN USE THE SAME COLLECTION METHODS AGAINST YOU THAT CAN BE USED AGAINST THE BORROWER, SUCH AS SUING YOU, GARNISHING YOUR WAGES, ETC. IF THIS DEBT IS EVER IN DEFAULT, THAT FACT MAY BECOME A PART OF YOUR CREDIT RECORD.

BY SIGNING BELOW, THE COSIGNER ENTERS INTO A CONTRACT WITH THE BANK BY WHICH THE COSIGNER BECOMES LIABLE FOR THE APPLICANT'S DEBT.

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Cosigner's Signature \_\_\_\_\_ Date \_\_\_\_\_

[NOTE: Cosigner = Signer that is *not* an owner of the checking account.]

**CREDIT APPROVAL:**  
Eastern Savings Bank, fsb

By: \_\_\_\_\_  
Approval Signature \_\_\_\_\_ Date \_\_\_\_\_



Amount of Credit Requested: \_\_\_\_\_

Checking Account Number: \_\_\_\_\_

Co-Applicant/Cosigner			Co-Applicant/Cosigner		
Name (First, Middle, Last)			Name (First, Middle, Last)		
Street Address		City, State, Zip	Street Address		City, State, Zip
Home Telephone	Mobile Telephone	# of Years There	Home Telephone	Mobile Telephone	# of Years There
Social Security #	Date of Birth	# of Dependents	Social Security #	Date of Birth	# of Dependents
Housing Status <input type="checkbox"/> Renting (Landlord's Name) _____ <input type="checkbox"/> Lives with Relatives _____ <input type="checkbox"/> Buying (Mortgage Holder) _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Home Paid For _____			Housing Status <input type="checkbox"/> Renting (Landlord's Name) _____ <input type="checkbox"/> Lives with Relatives _____ <input type="checkbox"/> Buying (Mortgage Holder) _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Home Paid For _____		
Monthly Mtg/Rent Pmt	Mortgage Balance	Value of Home	Monthly Mtg/Rent Pmt	Mortgage Balance	Value of Home
Previous Street Address		# of Years There	Previous Street Address		# of Years There
Employer		Telephone Number	Employer		Telephone Number
Employer's Street Address		City, State, Zip	Employer's Street Address		City, State, Zip
Occupation		# of Years There	Occupation		# of Years There
Previous Employer	Occupation	Telephone Number	Previous Employer	Occupation	Telephone Number
Name of Nearest Relative Not Living With You		Relationship	Name of Nearest Relative Not Living With You		Relationship
Address		Telephone Number	Address		Telephone Number

Annual Gross Income		Annual Gross Income	
Regular Earnings/Self Employed (annualized)	\$ _____	Regular Earnings/Self Employed (annualized)	\$ _____
Overtime Bonus	\$ _____	Overtime Bonus	\$ _____
Interest/Dividends	\$ _____	Interest/Dividends	\$ _____
Other (Describe) _____	\$ _____	Other (Describe) _____	\$ _____
<small>(Alimony, child support, or maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)</small>		<small>(Alimony, child support, or maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)</small>	
<b>Total \$</b>	_____	<b>Total \$</b>	_____

General			
1. Have you or has your co-applicant/cosigner ever been granted credit under any other name(s)? If yes give name(s). _____	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	3. Are you or is your co-applicant/cosigner a permanent resident alien?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you or is your co-applicant/cosigner a citizen of the United States?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	4. Are you or your co-applicant/cosigner currently a debtor in a bankruptcy proceeding?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No
		5. Are you or is your co-applicant/cosigner a Director, Executive Officer, or owner of more than 10% of the voting shares of Eastern Savings Bank, fsb?	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No Co-Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No

Everything stated in this application is correct to the best of my knowledge. I agree that all documents and information I have furnished to you belong to you. You are authorized to verify and re-verify any information contained in this application at any time, either directly or through a credit reporting agency, and from any source. Except as otherwise prohibited by applicable law, you may furnish to any of your subsidiaries any information and documents relating to me or my account(s) with you. You may also respond to credit inquiries from third parties regarding my account(s) with you. If credit is approved, I agree by signing below to abide by the Agreement and Disclosure governing this account and acknowledge receipt of the Agreement and Disclosure as the same may be amended from time to time and which constitutes the agreement. If I am a Cosigner, I also acknowledge receipt of a Notice to Cosigner. I also agree that you may take any money or property I have deposited with you to offset against any amounts I owe you under this Account. I acknowledge this agreement may not be amended except in writing. By signing below, I acknowledge receipt of the EasternEase Overdraft Line of Credit Agreement and Disclosure ("Agreement and Disclosure").

Co-Applicant/Cosigner Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant/Cosigner Signature \_\_\_\_\_ Date \_\_\_\_\_

Branch Use Only Received By \_\_\_\_\_ Date Received \_\_\_\_\_ Operations Use Only Received By \_\_\_\_\_ (Forward to Mgmt for Review)