

One for All Application



How are you applying?

INDIVIDUAL (Must be a Hawaii resident.)

- Only Applicant to use the credit and be contractually liable for repayment.
- Only information on Applicant to be filled in.
- Credit to be issued only to Applicant.

JOINT (Both must be Hawaii residents.)

- Applicant *and* Co-applicant to use the credit and be contractually liable for repayment.
- Fill in information for both Applicant and Co-applicant.
- Both Applicant and Co-applicant must sign application.
- Credit to be issued to Applicant and Co-applicant.

IF YOU ARE APPLYING FOR A SECURED LOAN COMPLETE THIS SECTION.		Requested Amount \$ _____	
APPLICANT: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. single, divorced and widowed) CO-APPLICANT: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. single, divorced and widowed) or OTHER PARTY		If self-employed or retired, please attach income tax returns for the past two years. <input type="checkbox"/> Preferred CreditLine <input type="checkbox"/> New or <input type="checkbox"/> Increase with Checking Account # _____ <input type="checkbox"/> Personal <input type="checkbox"/> Auto <input type="checkbox"/> Secured Personal <input type="checkbox"/> Other _____	
PURPOSE: _____		COLLATERAL: _____	
PROCEEDS TO BE USED FOR: <input type="checkbox"/> Personal Use <input type="checkbox"/> Business Use <input type="checkbox"/> Home Improvement		If real estate is collateral, Tax Map Key: _____	

Tell us about yourself

LAST NAME	FIRST	INITIAL	SOCIAL SECURITY NUMBER	BIRTH DATE / /	
HOME ADDRESS			HOW LONG? YRS. MOS.	PHONE	CELLULAR
CITY / STATE / ZIP			IN HAWAII YRS. MOS.	NUMBER OF DEPENDENTS	
PREVIOUS ADDRESS (IF LESS THAN TWO YEARS)			CITY / STATE / ZIP		

Your employment

EMPLOYER (IF SELF-EMPLOYED OR RETIRED, ATTACH INCOME TAX RETURNS FOR PAST TWO YEARS.)	PHONE	HOW LONG? YRS. MOS.
ADDRESS CITY / STATE / ZIP	JOB TITLE / MILITARY RANK	
PREVIOUS EMPLOYER (IF LESS THAN TWO YEARS)	PHONE	HOW LONG? YRS. MOS.
ADDRESS CITY / STATE / ZIP	JOB TITLE / MILITARY RANK	
BRANCH OF SERVICE (MILITARY APPLICANTS ONLY)	ETS	ROTATION DATE

Co-applicant

LAST NAME	FIRST	INITIAL	SOCIAL SECURITY NUMBER		
HOME ADDRESS	CITY / STATE / ZIP		PHONE	CELLULAR	BIRTH DATE / /
EMPLOYER	PHONE		HOW LONG? YRS. MOS.		
JOB TITLE / MILITARY RANK	BRANCH OF SERVICE (MILITARY APPLICANTS ONLY)		ETS	ROTATION DATE	

Your financial information

YOUR MONTHLY GROSS INCOME \$	CO-APPLICANT'S MONTHLY GROSS INCOME + \$	OTHER MONTHLY GROSS INCOME* + \$	TOTAL MONTHLY GROSS INCOME = \$
SOURCE OF OTHER MONTHLY GROSS INCOME*			

*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, or separate maintenance income received under: Court Order Written Agreement Oral Understanding

Personal Information Sharing 'Opt-Out' Form

If you previously opted out, you do not need to complete this form. Your opt out is still in effect.

Check appropriate type (individual or joint)

- Individual Account**
(check appropriate box)
- Me Only
- All Owners

Please print.

CUSTOMER INFORMATION

Customer Name _____

Mailing Address _____

City/State/Zip _____

Telephone _____

Social Security Number _____

ACCOUNT INFORMATION

Account Number _____

Account Type (Example: Checking, credit card, mortgage loan, etc.) _____

Customer Signature _____

Date _____

Customer Signature _____

Date _____



AMERICAN
Savings Bank

PRIVACY POLICY

FOR CUSTOMERS

As of June 2003



At American Savings Bank ("American Savings"), protecting the privacy and confidentiality of your Personal Information is important. We value your business and the trust you have placed in American Savings to provide a safe and secure environment for personally identifiable information about you and your finances, which we will call in this Privacy Policy your "Personal Information." It is our policy that all Personal Information about you will be held in strictest confidence. American Savings does not sell or share your Personal Information or Personal Information about our former customers to non-affiliated third parties outside the American Savings family of companies except for those companies who work for us and as permitted by law. To help you better understand how we protect your Personal Information, we are providing you with the following Privacy Policy describing our privacy practices and policies with respect to your Personal Information pursuant to the Federal Financial Privacy Law.

INFORMATION WE COLLECT

We collect, maintain, and use information about you on a routine basis in order to offer you the financial services and products you seek to obtain and to provide superior customer service. We use all of your Personal Information we collect for specific business purposes such as administering and servicing your accounts, complying with state/federal banking regulations, protecting against fraud, and developing a better understanding of your financial needs to provide you with improved products and services. Personal Information we collect falls within the following five categories:

- (1) Personal Information provided by you during the application process or other forms, such as your name, address, Social Security number, assets and income;
- (2) Personal Information gathered from your transactions and experiences with us and our affiliates, such as account balances, payment history and credit usage;
- (3) Personal Information obtained from your transactions and experiences with other parties, such as your account balances, payment history, parties to the transaction and credit card usage;
- (4) Personal Information obtained from other authorized sources, such as consumer credit reporting agencies; and
- (5) Personal information we obtain from third-parties about you and your employment, credit or other relationships with them, such as your employment history and credit balances which we use for various purposes, such as verifying your statements to us.

SHARING PERSONAL INFORMATION WITH THIRD PARTIES

We do not disclose your Personal Information or any Personal Information about our current or former customers to any affiliate or nonaffiliated third party except as permitted by law. We may disclose all of your Personal Information described above with third parties for the purpose of servicing your loan and deposit accounts with us, such as printing your checks, mailing your account statements, running credit or check verifications, processing transactions that you have requested or authorized.

We may share your Personal Information with third parties who conduct marketing services on our behalf and other financial institutions with whom we have joint marketing agreements. Those third parties are contractually obligated to keep your Personal Information provided to them confidential, and to use the information only to provide the service we have asked them to perform.

PERSONAL INFORMATION SECURITY

We restrict access to your Personal Information to those employees who need to know the Personal Information to provide our products or services to you. We maintain physical, electronic and procedural safeguards that comply with federal standards to protect your Personal Information.

SHARING PERSONAL INFORMATION WITH OUR AFFILIATES

American Savings may share all five of the categories of your Personal Information described above with our affiliates. For example, we may disclose all five categories of your Personal Information to our affiliates who provide financial services, such as American Savings Investment Services Corp., which sells insurance and investment products, and American Savings Insurance Agency which sells a variety of insurance products. We also may share all five categories of your Personal Information to our non-financial company affiliate, AdCommunications, who assists us with the advertising and marketing of our products and services. We work with our affiliates to provide the products and services you want and need. By sharing your Personal Information with our affiliates, American Savings is able to offer its customers investment and insurance products.

LIMITING OUR SHARING OF PERSONAL INFORMATION

If you do not want us to share your Personal Information obtained from your applications, consumer reports or from other outside sources with our affiliates, please tell us of this request by calling 627-6900 (toll free 1-800-277-2566) or dropping off the attached form at any American Savings branch. **If you previously opted out and wish to continue your opt out, you do not need to do anything.** If you are a joint accountholder, we will treat your request for us not to share that Personal Information with our affiliates as applying only to you and not to other joint accountholders, unless you inform us that your instruction applies to all of the joint accountholders, or all of the other joint accountholders individually or jointly request us not to share that Personal Information with our affiliates. Please note that it may take two to four weeks to make your request fully effective and you will still be contacted as necessary to service your accounts or receive marketing information on existing or new American Savings products and services.

CHANGES TO OUR PRIVACY POLICY

We will provide you with our Privacy Policy annually, so long as you maintain an on-going customer relationship with us. You can review our current Privacy Policy on our website at asbhawaii.com, or contact us for a copy by calling 627-6900 (toll free 1-800-277-2566). If you receive multiple copies of this form, you need to complete and return only one form.

If you previously opted out, you do not need to complete this form.

Your opt out is still in effect.

If you would like to 'opt out' and have American Savings Bank exclude your Personal Information from being shared with our affiliates, you may contact us at 627-6900 (toll free 1-800-277-2566), or drop this completed form into any American Savings Bank 'Express Teller Box' (located in each of our branches).

Do not mail.

Please allow at least 2 to 4 weeks for your request to be implemented.

Note: If you receive multiple copies of this form, you need to complete and return only one form.



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