Secured Personal Loan Application Packet

AMERICAN Savings Bank

Thank you for your interest in our Secured Personal Loan program. To assist us in processing your application quickly, please submit the following items:

1. One For All Application – Fill out the application as completely as possible, date and sign.
2. Notices to applicant – Date and sign.
3. Loans outstanding with American Savings Bank – Thoroughly read, complete, date and sign.
4. Copies of most recent paycheck stubs (equivalent to one month's salary). If you are self-employed or your income is dependent upon rental, substantial dividend/interest or other income, copies of your personal federal tax returns for the past two (2) years are required. These tax returns must be signed and submitted with all supporting schedules.

   If you own 25% or more of the company which employs you, we also need business federal tax returns for the past two (2) years along with current financial statements.
5. Personal financial statements.
6. If applicable, a copy of your Master Lease or Agreement of Sale.
7. If your property is part of your trust, provide a copy of the long form trust agreement.

Please do not hesitate to call one of our conveniently located branches or the Consumer Loan Department at 952-7000 if you need assistance or more information.

American Savings Bank is ready to proceed with your loan request just as soon as we receive the above information.

Make the Most of your Home's Equity with an American Savings Bank SECURED PERSONAL LOAN

With our **Secured Personal** Loans, you can borrow against more equity in your home. In some cases as much as 95-100%. You can use your **Secured Personal** Loan for anything you like – fee purchase, debt consolidation, even home improvement!

Here is some general information about Secured Personal Loans from American Savings Bank:

Reasonable Amounts, Great Terms

Borrow between $7,500 - $40,000, for a term of up to 20 years.

Flexible Borrower Requirements

This loan is available for *both* owner-occupants and investors. (However, it must be secured by residential property.)

Tax Advantages

The interest you pay on your Secured Personal Loan may be tax-deductible. Ask your tax advisor.

Liberal Loan-to-Value

You really *can* use more of your home's equity, with our liberal loan-to-value standards:

* 95% on simultaneous purchase money transactions, debt consolidations and home improvement, etc.
* 100% of leasehold value, plus 100% of fee purchase for lease to fee transactions.

Low Cost And Low Payments

Points range from 0-3% of the loan amount, depending on what loan rate *you* select. And, there are no appraisal fees for our Secured Personal Loan. Recording, Notary and Flood Zone Analysis fees apply. (Legal fees may also apply if the property is held in trust, for purchase transactions or for lease-to-fee transactions.) Example: A loan amount of $15,000 at 9.00% for 20 years plus 3.0% (points) has an estimated monthly payment of $134.95.

Additional Benefits

* Fast loan approval – within 2 days after we receive your completed application and all related documents.
* Low monthly payments.
* It's easy to apply!

Ask any of our loan officers and/or managers at any of our 71 branches statewide for an application, or call the Consumer Loan Department at 952-7000 (neighbor islands toll free 1-800-272-2566), ext. 7000 and we'll be happy to send you one!

For more information, call 952-7000 today!

One for All Application

AMERICAN Savings Bank

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. APPLICANT: ☐ Married ☐ Separated ☐ Unmarried (incl. single, divorced and widowed) CO-APPLICANT: or OTHER PARTY ☐ Married ☐ Separated ☐ Unmarried (incl. single, divorced and widowed)	Requested Amount $____ **If self-employed or retired, please attach income tax returns for the past two years.** ☐ Preferred CreditLine ☐ New or ☐ Increase with Checking Account #____ ☐ Personal ☐ Auto ☐ Secured Personal ☐ Other____
PURPOSE:____ ____ PROCEEDS TO BE USED FOR: ☐ Personal Use ☐ Business Use ☐ Home Improvement	COLLATERAL:____ ____ 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

Assets

AMERICAN SAVINGS BANK ACCOUNTS:	CHECKING BALANCE $	SAVINGS BALANCE $	YEAR HOME PURCHASED	ORIGINAL PUR. PRICE $	PRESENT VALUE $
YOUR CAR MAKE: MODEL: YEAR:		PRESENT VALUE $	OTHER REAL ESTATE (LOCATION)		PRESENT VALUE $
OTHER ASSETS (STOCKS, ETC.)		PRESENT VALUE $	OTHER ASSETS (STOCKS, ETC.)		PRESENT VALUE $

Obligations

How many loans do you have with American Savings Bank?_______________

MORTGAGE HOLDER / LANDLORD			☐ RENT ☐ OWN	MONTHLY PAYMENT $	AMOUNT OWED $
AUTO LOAN (WHERE)	MONTHLY PAYMENT $	AMOUNT OWED $	CREDIT CARD (WHERE)	MONTHLY PAYMENT $	AMOUNT OWED $
CREDIT CARD (WHERE)	MONTHLY PAYMENT $	AMOUNT OWED $	CREDIT CARD (WHERE)	MONTHLY PAYMENT $	AMOUNT OWED $
OTHER OBLIGATIONS (WHERE)	MONTHLY PAYMENT $	AMOUNT OWED $	OTHER OBLIGATIONS (WHERE)	MONTHLY PAYMENT $	AMOUNT OWED $

References

NAME(S) OF PARENT(S) LIVING	ADDRESS	CITY / STATE / ZIP	PHONE
NEAREST RELATIVE (NOT AT PRESENT ADDRESS)	ADDRESS	CITY / STATE / ZIP	PHONE

	YES	NO		YES	NO
Have you ever filed for bankruptcy within the past 7 years?	☐	☐	Are there any outstanding judgement or liens against you?	☐	☐
If yes, what year_______________			Are you a co-signer / guarantor on any loans or contracts?	☐	☐

If you answered yes to any of the above, please attach an explanation of the circumstances or situation.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government 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. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Signature(s)

By signing below, you are agreeing that all information provided above is correct and to the best of your knowledge. American Savings Bank (ASB) is authorized to verify your credit and employment history. You understand that ASB will retain this application whether or not it is approved. If you are applying for a Preferred CreditLine, you are agreeing by signing below to be liable for any cash advances and all other charges. You will receive a Preferred CreditLine Agreement (your Agreement) with your approval letter. Please read it. By using your Preferred CreditLine, you are agreeing to the terms of your Preferred CreditLine Agreement and it will be binding upon you until you or ASB cancels your account as provided in your Agreement.

X ______________________________
APPLICANT'S SIGNATURE DATE

X ______________________________
CO-APPLICANT'S SIGNATURE DATE

INFORMATION FOR GOVERNMENT MONITORING PURPOSES (Real Estate Loans Only)

The following information is requested by the Federal Government for real property home loans secured by your principal residence, in order to monitor our compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that we 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 we are required to note race and sex on the basis of visual observation or surname. IF YOU DO NOT WISH TO FURNISH THIS INFORMATION, PLEASE INITIAL BELOW.

APPLICANT:	I do not wish to furnish information. ☐ Initials	**CO-APPLICANT:**	I do not wish to furnish information. ☐ Initials
AGE: ______ SEX:	☐ Female ☐ Male	AGE: ______ SEX:	☐ Female ☐ Male
ETHNICITY: ☐ Hispanic or Latino	☐ Not Hispanic or Latino	ETHNICITY: ☐ Hispanic or Latino	☐ Not Hispanic or Latino
RACE: ☐ American Indian or Alaskan Native ☐ Native Hawaiian or Pacific Islander	☐ Asian ☐ Black or African American ☐ White	RACE: ☐ American Indian or Alaskan Native ☐ Native Hawaiian or Pacific Islander	☐ Asian ☐ Black or African American ☐ White

Borrower's Certification & Authorization

Certification

The undersigned certify the following:

1. I/We have applied for a home equity line of credit or secured personal loan from AMERICAN SAVINGS BANK. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.

2. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this loan, as applicable under the provisions of Title 18, United States Code, Section 1014.

Authorization to Release Information

To Whom It May Concern:

1. I/We have applied for a home equity line of credit or secured personal loan from AMERICAN SAVINGS BANK. As part of the application process, AMERICAN SAVINGS BANK may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.

2. I/We authorize you to provide to AMERICAN SAVINGS BANK any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.

3. A copy of this authorization may be accepted as an original.

______________________________ Borrower's Signature/Date

______________________________ Borrower's Signature/Date

______________________________ Borrower's Signature/Date

______________________________ Borrower's Signature/Date

RESPA TRANSFER OF SERVICING DISCLOSURE STATEMENT

NOTICE TO FIRST LIEN MORTGAGE LOAN APPLICANTS: THE RIGHT TO COLLECT YOUR MORTGAGE LOAN PAYMENTS MAY BE TRANSFERRED. FEDERAL LAW GIVES YOU CERTAIN RELATED RIGHTS. IF YOUR LOAN IS MADE, SAVE THIS STATEMENT WITH YOUR LOAN DOCUMENTS. SIGN THE ACKNOWLEDGMENT AT THE END OF THIS STATEMENT ONLY IF YOU UNDERSTAND ITS CONTENTS.

Because you are applying for a mortgage loan covered by the Real Estate Settlement Procedures Act (RESPA) (12 U.S.C. §2601 et seq.) you have certain rights under that Federal law.

This statement tells you about those rights. It also tells you what the chances are that the servicing for this loan may betransferred to a different loan servicer. "Servicing" refers to collecting your principal, interest and escrow account payments, if any. If your loan servicer changes, there are certain procedures that must be followed. This statement generally explains those procedures.

Transfer Practices and Requirements. If the servicing of your loan is assigned, sold, or transferred to a new servicer, you must be given written notice of that transfer. The present loan servicer must send you notice in writing of the assignment, sale or transfer of the servicing not less than 15 days before the effective date of the transfer. The present servicer and the new servicer may combine this information in one notice, so long as the notice is sent to you 15 days before the effective date of the transfer. The 15 day period is not applicable if a notice of prospective transfer is provided to you at settlement. The law allows a delay in the time (not more than 30 days after a transfer) for servicers to notify you, upon occurrence of certain business emergencies.

Notices must contain certain information. They must contain the effective date of the transfer of the servicing of your loan to the new servicer, and the name, address, and toll-free or collect call telephone number of the new servicer, and toll-free or collect call telephone numbers of a period or department for both your present servicer and your new servicer to answer your questions. During the 60-day period following the effective date of the transfer of the loan servicing, a loan payment received by your old servicer before its due date may not be treated by the new loan servicer as late, and a late fee may not be imposed on you.

Complaint Resolution. Section 6 of RESPA (12 U.S.C. § 2605) gives you certain consumer rights, whether or not your loan servicing is transferred. If you send a “qualified written request” to your servicer, your servicer must provide you with a written acknowledgment within 20 Business Days of receipt of your request. A “qualified written request” is a written correspondence, other than notice on a payment coupon or other payment medium supplied by the servicer, which includes your name and account number, and the information regarding your request. Not later than 60 Business Days after receiving your request, your servicer must make any appropriate corrections to your account, or must provide you with a written clarification regarding any dispute. During this 60 Business Day period, your servicer may not provide information to a consumer reporting agency concerning any overdue payment related to such period or qualified written request.

A Business Day is any day in which the offices of the business entity are open to the public for carrying on substantially all of its business functions.

Damages and Costs. Section 6 of RESPA also provides for damages and costs for individuals or classes of individuals in circumstances where servicers are shown to have violated the requirements of that Section.

RESPA TRANSFER OF SERVICING DISCLOSURE STATEMENT (continued)

Servicing Transfer Estimates

1. The following is the best estimate of what will happen to the servicing of your mortgage loan:

   We may assign, sell or transfer the servicing of your loan while the loan is outstanding.

2. For all the first lien mortgage loans that we make in the 12 month period after your mortgage loan is funded, we estimate that the percentage of such loans for which we will transfer servicing is between 0 to 25%.

   This estimate does not include assignments, sales or transfers to affiliates or subsidiaries. This is only our best estimate and it is not binding. Business conditions or other circumstances may affect our future transferring decisions.

3. We have previously assigned, sold, or transferred the servicing of first lien mortgage loans.

ACKNOWLEDGMENT OF MORTGAGE LOAN APPLICANT

I/we have read this disclosure form, and understand its contents, as evidenced by my/our signature(s) below. I/we understand that this acknowledgment is a required part of the mortgage loan application.

APPLICANT'S SIGNATURE Date

APPLICANT'S SIGNATURE Date

APPLICANT'S SIGNATURE Date

APPLICANT'S SIGNATURE Date

Notice to Applicant for Extension of Credit

AMERICAN Savings Bank

TO: ____

RE: ____
(Address and / or legal description of property)

In the event an applicant for a mortgage loan is unable to come to your office to apply for credit extension, American may give out the application form as a convenience.

If this form has been given to you by someone other than an employee or agent of American, that person does not have our permission to assist you in completing this form, answer any questions concerning this application, or make any representations on your behalf.

Only an authorized employee of American may discuss this application with you. If you wish to arrange for a loan interview or need help filling out the form, please call our representative at the branch of your choice.

The undersigned hereby acknowledges receipt of this NOTICE TO APPLICANT FOR EXTENSION OF CREDIT

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government 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 which includes a residential loan.

What this means to you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

INSURANCE NOTICE

Pursuant to Chapter 479, Hawaii Revised Statutes, you are hereby notified that you are free to obtain the insurance required under the terms of this mortgage from any insurance company authorized to do business in the State of Hawaii.

FLOOD INSURANCE NOTICE

The improved real estate securing your loan *may or may not* be located in a special flood hazard area as determined on the Flood Insurance Rate Map (FIRM) or, if the FIRM is unavailable, on the Flood Hazard Boundary Map (FHBM).

1. Should your property securing your loan be identified as being in a special Flood Hazard Area, flood insurance coverage will be a requirement and a condition to your loan.
2. If your property is not located in a Special Flood Hazard Area, you are hereby notified that insurance is available for all structures.

☐ Yes, I am interested in obtaining flood insurance

☐ No, I do not wish to obtain flood insurance.

Flood insurance may be purchased from any insurance company authorized to do business in the State of Hawaii.

LEGAL EXPENSE NOTICE

This notice is to inform you that if American obtains legal assistance or advice regarding your loan or documents which are required for it, you will be charged for the documents and the legal expense. If American hires an attorney employed by a law firm, you will be charged the amount shown on the attorney's invoice for the work done on your loan. If American uses a staff attorney, you will be charged for the documents and American's cost of having its own attorney complete the necessary work. Any attorney used by American for your transaction will represent American. You may obtain legal advice regarding your loan from any attorney of your choice at your own expense.

DISBURSEMENT OF LOAN PROCEEDS NOTICE

Your escrow company may require that American deliver to them the full amount of your loan before your real estate transaction records. This requirement of your escrow company may result in additional interest charges to you.

American will charge you interest on the loan proceeds from the day we are required to pay your loan proceeds to your escrow company. You should ask your escrow company about their requirements in order to know if you may incur these additional interest charges.

NOTICE OF RIGHT TO RECEIVE A COPY OF AN APPRAISAL

You have the right to a copy of the appraisal report used in connection with your application for credit. If you wish a copy, please contact your loan officer. We must hear from you no later than 90 days after we notify you about the action taken on your credit application or you withdraw your application.

To assist us with your request, please provide us with the following information in your letter.

1. Borrowers' Name and Loan Number
2. Property Address

NOTICE OF NEGATIVE INFORMATION

We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

Receipt of these notices is hereby acknowledged.

Signature ____________________ Date ____________

Signature ____________________ Date ____________

Loans Outstanding with American Savings Bank

AMERICAN Savings Bank

Federal law regulates the total amount of credit ASB may offer one borrower. In order to determine the maximum loan amount ASB may offer you, it is necessary to collect information from you. Please read and answer the following questions. If for any reason you fail to provide full and adequate information, the loan process may be delayed and your loan may be denied. If ASB learns after your loan closes that this information is incorrect and that this loan exceeds the loans to one borrower limit for you, then ASB will require that your loan be repaid in full immediately.

1. Do you presently have any loans (eg. 1st Mortgage, 2nd Mortgage, VISA, Auto, Corporate, Commercial, EPL, PCL, etc.) with ASB, either individually or as a co-borrower, or guarantor with other individuals or entities?

☐ **Yes** ☐ **No**

If "Yes," please provide the following information:

Names of All Borrower(s), Guarantor(s)	Account Number	Date of Loan	Current Account Balance

2. Are you a member in a partnership, joint venture, business, corporation, association or any other business arrangement that has loans (eg. 1st Mortgage, 2nd Mortgage, VISA, Auto, Corporate, Commercial, EPL, PCL, etc.) with ASB where you are a borrower or guarantor?

☐ **Yes** ☐ **No**

If "Yes," please provide the following information:

Names of All Borrower(s), Guarantor(s)	Account Number	Date of Loan	Current Account Balance

3. List all loan applications currently being processed by American Savings Bank:

Branch or Office	Type of Loan	Date Application Filed	Loan Amount Requested

All Loan applicants must sign this form. By signing this form you are certifying to American Savings Bank that the information shown here is true, correct and complete.

______________________________ ______________________________

Signature Date Signature Date

FOR BANK USE ONLY

Does the borrower's loan balances plus the proposed loan amount exceed the LTOB limit of $10,000,000:

At Application: ☐ Yes* ☐ No

At Approval: ☐ Yes* ☐ No

At Closing: ☐ Yes* ☐ No

Audited: ☐ ASB/ CIS; ☐ M & I;

By:______________________________ ______________________________

Name Date

*If yes, do not proceed with loan request. Call the applicable Loan Department
(i.e.: Residential, Consumer, Corporate or Commercial.)

CONSUMER LOAN
PERSONAL FINANCIAL STATEMENT

AMERICAN SAVINGS BANK
1600 Kapiolani Boulevard, Suite 205
Honolulu, Hawaii 96814
Telephone 946-9502

Name	
Address	

This personal Financial Statement shows my true and correct financial condition as of ______________________________, 19______.

ASSETS		**LIABILITIES**	Acct. Nbr.	Mo. Pmt. and Mos. left to pay	Unpaid Balance
Cash with American Savings	$	Installment Accounts: Name of creditor		Pmt/Mos.	$
(Show type of accounts & acct. nos.)					
				/	
				/	
				/	
				/	
		Charges:		/	
Other financial institutions				/	
				/	
				/	
				/	
				/	
				/	
				/	
Earnest Money Deposited				/	
Stocks and Bonds (No./Description) (See Schedule II on back)				/	
				/	
		Automobile		/	
Life Insurance-Net Cash Value (See Schedule III on back)		1)		/	
		2)		/	
		3)		/	
SUB TOTAL LIQUID ASSETS	**$**	Credit Union Loans		/	
				/	
				/	
Real Estate Owned (Market Values) (See Schedule I on back)				/	
				/	
Vested Interest in Retirement Funds		Notes Payable on Real Estate (See Schedule I on back)		/	
				/	
Net Worth of Business Owned (Attached Financial Statement)				/	
				/	
		Second Mortgage		/	
Automobiles				/	
1) Year: Make: Model:				/	
2) Year: Make: Model:		Loans on Life Insurance Policies		/	
3) Year: Make: Model:				/	
Personal Property and Furniture				/	
		Alimony, Child Support		/	
Other Assets				/	
		Separate Maintenance Pmts		/	
				/	
		Total Monthly Payments		$	

		TOTAL LIABILITIES (B)	**$**
TOTAL ASSETS (A)	**$**	**NET WORTH (A minus B)**	**$**

COMPLETE ALL SCHEDULES AND SIGN ON REVERSE SIDE

SCHEDULES

Be sure to include every item under each schedule.

I. SCHEDULE OR REAL ESTATE OWNED (If additional properties owned attach separate schedule)

Address of Property (indicate S if Sold, **PS** if **P**ending **S**ale or **R** if **R**ental being held for income)	⇓	Type of Property	Present Mkt Value	Mortgage Company	Mortgage Loan Balance	Mort. Pmts.	Taxes, Maint. etc.	Total Pmt.	Gross Rental or A/S Income
			$		$			$	$
		TOTALS	$		$			$	$

II. STOCKS AND BONDS (Listed and Unlisted) - All securities listed are mine solely, and are in my possession except as noted, hereon.

Name of Issuing Corporation And Type of Security	No. of Shares (If Stock) Face Value (If Bond)	Annual Interest or Dividend	Market Value	Registered In Name Of
			$	

III. LIFE INSURANCE

Company	Face Amount Of Policy	Net Cash Value	Total Loans Against Policy	Beneficiary	To Whom Policy Is Assigned
	$	$	$		

IV. ADDITIONAL SCHEDULE ON NOTES AND ACCOUNTS PAYABLE - Includes Installment Debts, Revolving Charge Accounts, Bank Notes, etc. Specify any assets pledged as collateral, indicating the liabilities which they secure:

To Whom Payable	Date Due	Balance Owing	Monthly Payment	Collateral

I understand that American will depend upon the information I have given on this form when deciding whether to extend credit to me. I guarantee that the information shown is accurate. I have given all of the information related to my credit worthiness. I have not withheld anything.

I will notify American as soon as there is any change in my financial condition. If I have not told American about a change in my finances, then at a later date American may use this statement when deciding whether to continue my credit or to extend new credit to me.

DATE SIGNATURE DATE SIGNATURE

American Savings Bank wishes to bring you products and services that may be of benefit and interest to you. By submitting this form, you will not receive any information on special promotional offers and products and services of our affiliates. However, you will continue to receive account statements and various statement inserts.

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 1-800-272-2566), 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.

AMERICAN Savings Bank

IDENTITY THEFT
HOW TO PROTECT YOUR GOOD NAME

Identity theft is when someone obtains, and illegally uses, your personal information, such as name, address, and Social Security number. An 'Identity Thief' can ruin your good credit by opening new credit card accounts in your name, incurring large bills and leaving you to pay for the damage. You can help prevent this from happening to you by protecting your personal information.

- Always protect your account numbers, credit card numbers, PINs (Personal Identification Numbers) and passwords. Memorize your PIN and never keep it in your purse, wallet, or write them on the card.
- Do not use passwords that are easily identifiable to you, such as your child's or pet's name, Social Security number or phone number.
- Never give your Social Security number, financial and other personal information to someone over the telephone unless you initiate the call.
- Shred all of your receipts and financial and credit card statements before disposing of them.
- Retrieve and review your mail promptly. Thieves may use the personal information contained in your mail to steal your identity.
- Examine your account statements carefully to ensure all transactions are authorized.
- Do not print your Social Security number on your checks.
- Keep mail secure. Don't mail bills or send sensitive information from your home or unsecured mailboxes.
- Review your credit report periodically to ensure that accounts opened in your name are authorized. Credit bureau contact information is listed below.
- When submitting credit card payments by check, give only the last four digits of your credit card account number.
- If you suspect that you are a victim of identity theft contact American Savings Bank and report the incident to the Federal Trade Commission at 1-877-ID-THEFT (438-4338) immediately.

CREDIT BUREAUS

Experian – www.experian.com
1-888-EXPERIAN (397-3742)

Equifax – www.equifax.com
1-800-685-1111

TransUnion – www.transunion.com
1-800-888-4213

AMERICAN Savings Bank

Member FDIC

MKT015 (4D188/Rev.05/04)

AMERICAN Savings Bank

PRIVACY POLICY
FOR CUSTOMERS

As of June 2004

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 for a deposit, loan, brokerage account, and/or insurance policy, other forms, or interviews with our employees when opening an account with us, such as your name, address, Social Security number, investments, assets and income;

(2) Personal Information gathered from your transactions and experiences with us and our affiliates, such as account balances, payment history, securities and insurance products purchased 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, health and medical information or other relationships with them, such as your employment and health and medical 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 and insurance and investment products purchased through us, such as printing your checks, mailing your account statements, running credit or check verifications, servicing a brokerage account, processing an insurance claim, 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 affiliate Bishop Insurance Agency of Hawaii, Inc. 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 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 1-800-272-2566) 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 1-800-272-2566). If you receive multiple copies of this form, you need to complete and return only one form.

CUT ALONG DOTTED LINE

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**

◯ **Joint Account** (check appropriate box)

☐ Me Only

☐ All Owners

Please print.

CUSTOMER INFORMATION

Customer Name

Mailing Address

City/State/Zip

Telephone

I have the following accounts with American Savings Bank

☐ Deposits (checking, savings, CDs, etc.)

☐ Loans & Lines (mortgage, credit card, line of credit, etc.)

☐ Other (safe deposit box, etc.)

☐ Investment/Insurance (mutual funds, long-term care, etc.)

For verification purposes, please list at least one account number or your Social Security number.

Customer Signature | Date

If you have any questions or want to opt out by phone, call us at 627-6900 or 1-800-272-2566 from the neighbor islands or mainland.

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