



Application Authorization

I/We certify that all statements made on the attached application are accurate. I/We authorize Old Point National Bank to obtain credit reports, contact creditors and/or disclose information to creditors listed on the attached application. I/We understand that it is a federal crime to willfully provide incomplete or incorrect information on a loan application.

Signature of Applicant Date

Signature of Co-Applicant Date

Acknowledgement of Joint Credit

We, the undersigned, intend to apply for joint credit on the attached application.

Signature of Applicant Date

Signature of Co-Applicant Date

