

Loan Application

Account Number: _____

Individual Credit: You must complete the **Applicant** section about yourself and the **Other** section about your spouse if: 1- you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI), 2 - your spouse will use the account, or 3 - you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.

Joint Credit: Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

Check below to indicate the type of account(s) and type of credit for which you are applying. Married Applicants may apply for a separate account.

Account/Loan: Individual Joint Amount requested: \$ _____

Purpose/Collateral: _____ (including ATM/Debit card access if available)

Repayment: Cash Automatic Payment

Applicant	
Name (Last - First - Initial)	
Birth Date	Social Security Number
Driver's License Number/State	List ages of Dependents not listed by other applicant (Exclude self)
Home Phone () () ()	Business Phone/Ext () () ()
Cell Phone () () ()	
Present Address (Street - City - State - Zip)	
<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Years at this address	
Previous Address (Street - City - State - Zip)	
<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Years at this address	

Other: <input type="checkbox"/> Co-Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Other	
Name (Last - First - Initial)	
Birth Date	Social Security Number
Driver's License Number/State	List ages of Dependents not listed by applicant (Exclude self)
Home Phone () () ()	Business Phone/Ext () () ()
Cell Phone () () ()	
Present Address (Street - City - State - Zip)	
<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Years at this address	
Previous Address (Street - City - State - Zip)	
<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Years at this address	

Employment/Income		
Name and Address of Employer		
Job Title	Start Date	Hours at work
Supervisor's Name	If self employed, type of business	

Employment/Income		
Name and Address of Employer		
Job Title	Start Date	Hours at work
Supervisor's Name	If self employed, type of business	

Notice: Alimony, child support, or separate maintenance income need not be revealed if you did not choose to have it considered.

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Employment Income	Other Income
\$ _____ per _____	\$ _____ per _____
<input type="checkbox"/> Net <input type="checkbox"/> Gross	Source
Previous employer name & address if employed less than 5 years	
Starting date	
Ending date	

Employment Income	Other Income
\$ _____ per _____	\$ _____ per _____
<input type="checkbox"/> Net <input type="checkbox"/> Gross	Source
Previous employer name & address if employed less than 5 years	
Starting date	
Ending date	

Applicant Reference	
Name & address of nearest relative not living with you	
Relationship	Phone

Other Reference	
Name & address of nearest relative not living with you	
Relationship	Phone

What you Owe	Creditor Name other than this credit union (Attach additional sheet if necessary)	Interest Rate	Present Balance	Monthly Payment	Owed by	
					Applicant	Other
<input type="checkbox"/> Rent <input type="checkbox"/> Mortgage			\$	\$		
2 nd Mortgage			\$	\$		
1 st Auto Loan			\$	\$		
2 nd Auto Loan			\$	\$		
Child Support			\$	\$		
Credit Card			\$	\$		
Credit Card			\$	\$		
Other			\$	\$		
Other			\$	\$		
Totals			\$	\$		

List all other Financial Institutions where you have funds on deposit							Owned by	
Type	Name of Institution	Account Number	Account Value	Pledged as collateral on another loan?			Applicant	Other
Savings			\$		Yes	No		
Checking			\$		Yes	No		
Other			\$		Yes	No		

Other information about you	If you answer "yes" to any question other than #1, explain on an attached sheet	Applicant		Other	
		Yes	No	Yes	No
1. Are you a US Citizen or Permanent Resident Alien?					
2. Do you currently have any outstanding judgements or have you ever filed for bankruptcy, had a debt adjustment plan confirmed under chapter 13, had property foreclosed upon or repossessed in the last 7 years or been a party in a lawsuit?					
3. Is your income likely to decline in the next two years?					
4. Are you a co-maker, co-signer or guarantor on any loan not listed above? For whom (name of others obligated on loan): _____ To whom (name of creditor): _____					
I would like Credit Life Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No		I would like Credit Disability Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No			

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, renewal or extension of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA.

X		X	
Applicant's Signature	Date	Other Signature	Date

OFFICE USE ONLY:		
Credit Score(s): _____/_____	Contractual debts	\$
Loan Officer decision: <input type="checkbox"/> Approved <input type="checkbox"/> Counter Offer <input type="checkbox"/> Denied	New payment	\$
	New monthly obligation	\$
Reasons:	Monthly income	\$
	Debt ratio	%
(ATTACH TAPE)		
Loan Officer (Signature(s) / Date		