

Application

Credit Union

Credit Union Use Only

Applicant Account No.

Unsecured Credit Limit

Loan Amount / Initial Advance

Term (if applicable)

Type of Credit Account Requested

Personal Loan Line of Credit Overdraft Protection Other (describe) _____ Individual
Purpose of Loan _____ Security, if any _____ Joint

Information About You

Please type or print in dark ink

Full Name _____ Birth Date _____ Social Security No. _____ Driver's License No. _____
Street Address _____ Own Live with Parents Years at this Address
 Rent Other
City _____ State _____ Zip Code _____ Telephone No. _____
Number of Dependents (excluding self) _____ Ages of Dependents _____

If you have lived at the above address less than two years, where did you live before?

Street Address _____ Own Live with Parents Years at this Address
 Rent Other
City _____ State _____ Zip Code _____

Marital Status [Do not complete if you are applying for individual, unsecured credit]

Married Separated Other (including single, divorced, or widowed)

Information About Your Employer

Employer _____ Self Employed _____ Street Address _____ Years with this Employer
 Yes No
City _____ State _____ Zip Code _____ Telephone No. _____
Position/Title _____ Department _____ Name of Supervisor _____ Payroll No. _____

If you have worked for your present employer less than two years, where did you work before?

Previous Employer _____ Self Employed _____ Street Address _____ Years with this Employer
 Yes No
City _____ State _____ Zip Code _____ Telephone No. _____
Position/Title _____ Department _____ Name of Supervisor _____

Information About Your Income

Wages/Salary _____ Gross *If take-home pay is disclosed, Hours Worked _____ Payroll
\$ _____ Per _____ Take Home* include all payroll deductions. Per Week _____ Monthly Bi-Weekly
 Semi-Monthly Weekly

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 any obligations incurred under the credit union's loan programs.

Other Income: \$ _____ Per _____ Source _____
\$ _____ Per _____ Source _____

Alimony, child support, or separate maintenance is being received under: court order written agreement oral understanding.

Is any income listed in this entire section likely to be reduced in the next two years? Yes No If "Yes", explain: _____

References

Nearest Relative Not Living with You _____ Street Address _____ City _____ State _____ Zip Code _____ Telephone No. _____
Name and Relationship _____

Personal Friend (not a relative) _____ Street Address _____ City _____ State _____ Zip Code _____ Telephone No. _____
Name _____

Information About Your Debts (List all debts, including credit union loans. Attach a separate sheet, if necessary.)

Loan or Debt	App	Co-App	Creditor	Account Number	Original Amount/ Credit Limit	Current Balance	Monthly Payment
Mortgage/Rent							

Are you a co-maker, endorser, or guarantor on any debt obligation not listed above? Yes No If "Yes", provide debtor's name, current loan balance, and other details (including name and address of any creditors):

Are there any unsatisfied judgements, garnishments, or lawsuits pending against you? Yes No If "Yes", provide dollar amount and details:

Have you declared bankruptcy in the last 10 years? Yes No If "Yes", provide date and place of filing:

Have you ever been granted credit in another name? Yes No If "Yes", what was that name and where was the credit granted:

Are you presently liable for any alimony, child support, or separate maintenance payments? Yes No If "Yes", what is the amount and frequency of those payments:

Have you been denied credit in the last six months? Yes No

Group Credit Insurance

Group credit insurance is voluntary and not a requirement of your loan.

To be eligible for Group Credit Life and/or Disability Insurance, you must be less than 70 years old. If your loan has a fixed repayment period, it must mature before your 70th birthday. Additionally, to be eligible for Credit Disability Insurance, you must be actively at work and gainfully employed at least 20 hours per week. As part of the enrollment process, you must satisfactorily complete a Statement of Insurability.

Assuming your application for credit is approved and you are eligible for insurance, the credit union will disclose its cost to you. You will also be asked to sign the appropriate request for coverage form.

Indicate which credit insurance option(s) you desire: Joint Life Insurance Single Life Insurance Single Disability Insurance No credit insurance.

Payroll Deduction and Automatic Transfer Privileges

In many instances, loan obligations can be repaid through voluntary payroll deduction made available to the credit union by your employer or by the automatic transfer of funds from a share account. The credit union will tell you if your loan can be repaid in these manners. Assuming it can be, check the appropriate box below.

I want voluntary payroll deduction. I authorize automatic transfer of my loan payment(s) from Account No.: I do not want payroll deduction or automatic transfer.

Representations & Authorizations

You represent everything stated in this application is correct to the best of your knowledge. You further represent you have provided a complete listing of all your debts and obligations.

You authorize the credit union to investigate your credit record, verify your employment and income information, and answer questions regarding your credit history. You also authorize the credit union to obtain credit reports in connection with this application and for any update, renewal or extension of the credit received. If you request it, 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 the National Credit Union Administration.

Applicant's Signature _____ Date _____ Witness (if requested by Credit Union) _____ Date _____

I am applying for joint credit with a Co-Borrower. Applicant's Initials _____

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Loan Officer

Approved Counter-Offer to be made. Application approved if Applicant accepts all conditions set forth below. Denied Referred to Credit Committee.

Loan Officer Signature _____ Date _____

Credit Committee

Approved Counter-Offer to be made. Application approved if Applicant accepts all conditions set forth below. Denied

Committee Member Signature _____ Date _____
 Committee Member Signature _____ Date _____
 Committee Member Signature _____ Date _____

Credit Limit Approved: \$ _____

Explanation of counter-offer conditions, referral to Credit Committee, or reason for denial: _____

ECOA Notice and reason for denial sent or delivered: By _____ Date _____
 Credit Union Representative

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