

# Loan Application

## Loan Information

Applicant Name	Other Name		
	Co-Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Guarantor <input type="checkbox"/>		
Amount Requested \$	Purpose	Interest Rate	%
Payment \$	Number of Payments		
Repayment Method: Payroll Deduction <input type="checkbox"/> Cash <input type="checkbox"/> Automatic Transfer from Account <input type="checkbox"/> Automatic Payment <input type="checkbox"/>			
Description of Collateral		Estimated Value of Collateral \$	
Insurance: Single Credit Disability <input type="checkbox"/> Single Credit Life <input type="checkbox"/> Joint Credit Life <input type="checkbox"/>			

## Personal Data

Applicant	Other (Co-Applicant, Spouse, Guarantor)
Driver's License Number <span style="float: right;">State</span>	Driver's License Number <span style="float: right;">State</span>
Credit Union Account Number <span style="float: right;">Social Security</span>	Credit Union Account Number <span style="float: right;">Social Security</span>
Birth Date <span style="float: right;">Home Phone</span>	Birth Date <span style="float: right;">Home Phone</span>
Marital Status Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried <input type="checkbox"/>	Marital Status Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried <input type="checkbox"/>
Current Address	Current Address
Own <input type="checkbox"/> Rent <input type="checkbox"/> Date Moved To This Address	Own <input type="checkbox"/> Rent <input type="checkbox"/> Date Moved To This Address
Previous Address (if less than 2 years at current address)	Previous Address (if less than 2 years at current address)
Own <input type="checkbox"/> Rent <input type="checkbox"/> Date Moved To This Address	Own <input type="checkbox"/> Rent <input type="checkbox"/> Date Moved To This Address

# Employment Data

Applicant	Other (Co-Applicant, Spouse, Guarantor)
<p><i>Current Employer Name and Address</i></p>   <p><i>Start Date</i> _____ <i>Check here if full-time</i> <input type="checkbox"/></p> <p><i>Phone</i> _____ <i>Extension</i> _____</p> <p><i>Job Title</i> _____</p> <p><i>Business Type</i></p> <p><i>Check here if self-employed</i> <input type="checkbox"/></p>	<p><i>Current Employer Name and Address</i></p>   <p><i>Start Date</i> _____ <i>Check here if full-time</i> <input type="checkbox"/></p> <p><i>Phone</i> _____ <i>Extension</i> _____</p> <p><i>Job Title</i> _____</p> <p><i>Business Type</i></p> <p><i>Check here if self-employed</i> <input type="checkbox"/></p>
<p><i>Previous Employer (if employed less than 2 years at current employer)</i></p>   <p><i>Start Date</i> _____ <i>End Date</i> _____</p> <p><i>Phone</i> _____</p>	<p><i>Previous Employer (if employed less than 2 years at current employer)</i></p>   <p><i>Start Date</i> _____ <i>End Date</i> _____</p> <p><i>Phone</i> _____</p>

# References

Applicant Name	Other (Co-Applicant, Spouse, Guarantor)
<b>REFERENCE #1: PAID-OFF DEBT</b>	<b>REFERENCE #1: PAID-OFF DEBT</b>
<i>Phone</i>	<i>Phone</i>
<b>REFERENCE #2: RELATIVE</b>	<b>REFERENCE #2: RELATIVE</b>
<i>Relationship</i> _____ <i>Phone</i>	<i>Relationship</i> _____ <i>Phone</i>
<b>REFERENCE #3: NON-RELATIVE</b>	<b>REFERENCE #3: NON-RELATIVE</b>
<i>Relationship</i> _____ <i>Phone</i>	<i>Relationship</i> _____ <i>Phone</i>

# Income

Applicant Name				Other (Co-Applicant, Spouse, Guarantor)			
<i>Description</i>	<i>Amount</i>	<i>Frequency</i> <small>(Monthly, Yearly, etc.)</small>	<i>Net or</i> <small>GROSS</small>	<i>Description</i>	<i>Amount</i>	<i>Frequency</i> <small>(Monthly, Yearly, etc.)</small>	<i>Net or</i> <small>GROSS</small>
<b>Employment Income</b>	\$			<b>Employment Income</b>	\$		
<b>Other Income</b> _____ <small>(describe)</small>	\$			<b>Other Income</b> _____ <small>(describe)</small>	\$		
<b>Other Income</b> _____ <small>(describe)</small>	\$			<b>Other Income</b> _____ <small>(describe)</small>	\$		
<b>TOTAL INCOME</b>	\$			<b>TOTAL INCOME</b>	\$		

\*Self-employed borrowers may be required to provide additional documentation such as tax returns and financial statements.  
 \*\*Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying the loan.

# Assets

Applicant Name	Other (Co-Applicant, Spouse, Guarantor)
<i>CREDIT UNION MEMBER</i>	<i>CREDIT UNION MEMBER</i>
Savings (Share) Balance      \$	Savings (Share) Balance      \$
Checking (Draft) Balance    \$	Checking (Draft) Balance    \$
<i>OTHER DEPOSITORY</i>	<i>OTHER DEPOSITORY</i>
Savings Balance    \$                      Account No.	Savings Balance    \$                      Account No.
Checking Balance   \$                     Account No.	Checking Balance   \$                     Account No.
<i>Name and address of other depository.</i>	<i>Name and address of other depository.</i>

**OTHER ASSETS**

Indicate Owner:		Code	Description	Current Market Value	Pledged as Collateral For Another Loan?		Account Number (If Applicable)
Applicant	Other				Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>			\$	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>TOTAL ASSETS</b>				\$			

# Debts

<b>Mortgage and Other Loan Debt</b>											
<i>Indicate Owner:</i>		<i>Code</i>	<i>Description</i>	<i>Account Number</i>	<i>Lender Institution Name</i>	<i>Original Balance</i>	<i>Present Balance</i>	<i>Payment Amount</i>	<i>Frequency (Monthly, Yearly, etc.)</i>	<i>Ending Month &amp; Year</i>	<i>Interest Rate</i>
<i>Applicant</i>	<i>Other</i>										
<input type="checkbox"/>	<input type="checkbox"/>					\$	\$	\$			%
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<input type="checkbox"/>	<input type="checkbox"/>					\$	\$	\$			%
TOTAL DEBT						\$	\$	\$			

<b>Open Lines of Credit (including credit cards)</b>											
<i>Indicate Owner:</i>		<i>Code</i>	<i>Description</i>	<i>Account Number</i>	<i>Lender Institution Name</i>	<i>Original Balance</i>	<i>Present Balance</i>	<i>Payment Amount</i>	<i>Frequency (Monthly, Yearly, etc.)</i>	<i>Ending Month &amp; Year</i>	<i>Interest Rate</i>
<i>Applicant</i>	<i>Other</i>										
<input type="checkbox"/>	<input type="checkbox"/>					\$	\$	\$			%
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TOTAL DEBT						\$	\$	\$			

# Financial Information

<i>If answering "Yes" on any of the questions in this section, please explain at the bottom of this form.</i>	Applicant		Other	
	Yes	No	Yes	No
Are there any outstanding judgements against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever filed for bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you had property foreclosed upon or repossessed in the last 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you other than a United States citizen or permanent resident alien?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is your income likely to decline in the next 2 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Signatures

Applicant is applying for Joint Credit \_\_\_\_\_  
Initials

*If there are any important changes, you will notify us in writing immediately. You also agree to notify us of any change in your name, address or employment within a reasonable time thereafter. You also 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 all your debts and obligations. 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. If you request, the credit union will tell you the name and address of any address of any credit bureau from which it received a credit report on you. You understand that 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.*

<b>Applicant Name</b>		<b>Other (Co-Applicant, Spouse, Guarantor)</b>	
<i>Applicant Signature</i>	<i>Date</i>	<i>Other Signature</i>	<i>Date</i>
<i>Loan Office Signature</i>	<i>Date</i>	<i>Committee Representative Signature</i>	<i>Date</i>