

- Applicant
- Co-Borrower with: \_\_\_\_\_
- Co-Signer for: \_\_\_\_\_

Approved \$ \_\_\_\_\_

Rejected  
ECOA notice sent: \_\_\_\_\_

Credit Committee  
or Loan Officer

# Loan Application

## Personal Information

Account Number	SSN	Birthdate	Drivers License Number	Mother's Maiden Name
Name			Also Known As	
Address				Years There
Home Phone	Cell Phone	E-Mail Address	Number of Dependents?	
Previous Address				Years There
Name of Nearest Relative not Living with you		Address	Phone Number	Relationship
Name of Reference Not a Relative		Address	Phone Number	Relationship

## Income Information

Employer	Address	Phone Number
Position	Starting Date	Work Phone Extension
Supervisor's Name		Gross Income Hr/Mo
Previous Employer	Address	Position
Years of Service	Phone Number	Gross Income Hr/Mo
Other Income: Sources & Amounts		Income from alimony, child support, or separate maintenance need not be revealed if you do not wish to have it considered for repaying this obligation.

## Financial Information

Outstanding Judgements? Yes No <input checked="" type="checkbox"/>	Filed Bankruptcy? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Property Foreclosed? Yes <input checked="" type="checkbox"/> No	Party in a Lawsuit? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	US Citizen? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Income likely to be reduced In the future? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Cosigner/Guarantor Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Savings Accounts		Checking Accounts		Vehicles you own		
Mortgage or Rent	Creditor Name	Account Number	Balance	Monthly Payment		
2 <sup>nd</sup> Mortgage or Lot Rent						
Vehicle						
Vehicle						
Credit Card						
Credit Card						
Child Support and/or Alimony						
Other (Co-Signed?)						

## Loan Information

Loan Amount Requested	<input type="checkbox"/> Vehicle	<input type="checkbox"/> Personal	<input type="checkbox"/> Home Improvement
	<input type="checkbox"/> Revolving	<input type="checkbox"/> Overdraft Protection	<input type="checkbox"/> Consolidation
			<input type="checkbox"/> Other
Collateral	Year	Make	Model
			Options
			Mileage
Are you interested in credit insurance?	<input type="checkbox"/> Single Credit Disability	<input type="checkbox"/> Joint Credit Disability	<input type="checkbox"/> Single Credit Life
			<input type="checkbox"/> Joint Credit Life

Comments:

I certify that all information contained in this application is correct to the best of my knowledge and I have disclosed all outstanding obligations currently owed. I hereby give the Credit Union authorization to check on my credit; employment history; obtain a credit report; and to answer any questions about my credit experience with you. I understand that it may be a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts as applicable under the provisions of the United States Criminal Code.

Signature	Date
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