



Date: _____		User ID: <input style="width: 150px;" type="text"/>	
APPLICANT		OTHER	
NAME		NAME	
ACCOUNT NUMBER		ACCOUNT NUMBER	
Social Security No.	Driver's License Number/State:	Social Security No.	Driver's License Number/State:
Ages of Dependents	Email Address	Ages of Dependents	Email Address
Birth date	Home Phone	Cell Phone	Business Phone/Ext
Present Address (Street- City – State- Zip)		Present Address (Street- City – State- Zip)	
<input type="checkbox"/> Own <input type="checkbox"/> Rent		<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Length at Residence		Length at Residence	
Present Address (Street- City – State- Zip)		Present Address (Street- City – State- Zip)	
<input type="checkbox"/> Own <input type="checkbox"/> Rent		<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Length at Residence		Length at Residence	
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Single –Divorced-Widowed)			
EMPLOYMENT/INCOME		EMPLOYMENT/INCOME	
Name and Address of Employer		Name and Address of Employer	
Title/Grade:	Start Date:	Hours at Work	
Supervisor's Name	If Self Employed, Type of Business		
Employment Income \$ _____ Per _____	Other Income \$ _____ Per _____		
<input type="checkbox"/> Net <input type="checkbox"/> Gross	Source		
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS		PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS	
Starting Date		Starting Date	
Ending Date		Ending Date	
REFERENCE		REFERENCE	
Name and Address of nearest Relative Not living with you		Name and Address of nearest Relative Not living with you	
Relationship		Relationship	
Home Phone		Home Phone	

WHAT YOU OWE	CREDITOR NAME OTHER THAN THIS CREDIT UNION (ATTACH ADDITIONAL SHEET(S) IF NECESSARY)	Interest Rate	Present Balance	Monthly Payments	OWED BY	
					Applicant	Other
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
List any names under which your credit references and credit history can be checked.		Totals	\$	\$		

WHAT YOU OWN	List location of property or financial institution	Market Value	Pledged as Collateral for another loan		OWNED BY		
			Yes	No	Applicant	Other	
		\$		Yes	No		
		\$		Yes	No		
		\$		Yes	No		
		\$		Yes	No		
		\$		Yes	No		
		\$		Yes	No		
		\$		Yes	No		
		\$		Yes	No		
		\$		Yes	No		

FINANCIAL INFORMATION

1. Do you have any outstanding judgments?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are you a party in a lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you had property, furniture or vehicles foreclosed upon or repossessed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Are you a co-maker, co-signer or guarantor on any loan not listed above	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, for whom (Name of person)		

SIGNATURES

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, increase, renewal, extension or collection 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.

Applicant's signature: _____ Date: _____ Other Signature: _____ Date: _____

Disbursements

Date	Name of Creditor	Cash	Cheque no.	Amount
Sub-total				
Check By:	Verify by:	Late		
Fee/Interest				
Disbursed By:		Current		
Loan				
Total				

FOR CREDIT UNION USE ONLY

Date:	Approved	Comments:	Ratios:
	Denied		Before: After:
CEO/MANAGER:		Date:	
CREDIT COMMITTEE:		Date:	
BOARD OF DIRECTORS:		Date:	