

Applicant Reference	RELATIONSHIP	Other Reference	RELATIONSHIP
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	HOME PHONE	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	HOME PHONE

What You Owe	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST RATE	PRESENT BALANCE	MONTHLY PAYMENT	OWED BY	
					Applicant	Other
<input type="checkbox"/> RENT <input type="checkbox"/> FIRST MORTGAGE (Include Tax and Ins.)			\$	\$		
2nd MORTGAGE			\$	\$		
1st AUTO LOAN			\$	\$		
2nd AUTO LOAN			\$	\$		
CHILD-CARE			\$	\$		
CHILD SUPPORT			\$	\$		
CREDIT CARD			\$	\$		
CREDIT CARD			\$	\$		
OTHER			\$	\$		
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	PLEGGED AS COLLATERAL FOR ANOTHER LOAN		OWNED BY	
			YES	NO	Applicant	Other
HOME		\$				
AUTO		\$	YES	NO		
SAVINGS		\$	YES	NO		
CHECKING		\$	YES	NO		
OTHER (Describe)		\$	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 U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?			
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS 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):		

State Law Notices **OHIO RESIDENTS ONLY:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

X	DATE
SIGNATURE FOR WISCONSIN RESIDENTS ONLY	

Signatures									
<p>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</p>	<p>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.</p>								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align:center;">X</td> <td style="width:50%; text-align:right;">(SEAL)</td> </tr> <tr> <td colspan="2" style="text-align:center;">APPLICANT'S SIGNATURE</td> </tr> </table>	X	(SEAL)	APPLICANT'S SIGNATURE		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align:center;">X</td> <td style="width:50%; text-align:right;">(SEAL)</td> </tr> <tr> <td colspan="2" style="text-align:center;">OTHER SIGNATURE</td> </tr> </table>	X	(SEAL)	OTHER SIGNATURE	
X	(SEAL)								
APPLICANT'S SIGNATURE									
X	(SEAL)								
OTHER SIGNATURE									
DATE	DATE								

For Credit Union Use Only							
DATE	APPROVED	APPROVED SIGNATURE	LINE OF CREDIT	OTHER	OTHER	DEBT RATIO/SCORE BEFORE	AFTER
	DENIED (Adverse Action Notice Sent)	LIMITS: \$	\$	\$	\$		
LOAN OFFICER COMMENTS:							
SIGNATURES:							
X	X	DATE	DATE				



TIOGA AREA FEDERAL CREDIT UNION
 123 Main Street • Wellsboro, PA 16901
 Phone: (570) 724-3473

LOANLINER

Application

- HOW TO APPLY**
- Please complete front and back of application
 - Sign on back page
 - Return completed application to credit union
 - An incomplete or unsigned application may delay processing

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.

Guarantor: Complete the **Other** section if you are a guarantor on an account/loan.

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.

LOANLINER® Account/Loan: Individual Joint Amount Requested \$ _____ Purpose/Collateral: _____
 (Including ATM/Debit Card Access to the Account if Available)

Repayment: Payroll Deduction Cash Military Allotment Automatic Payment

Payment Protection Single Credit Disability Insurance

Check coverage(s) desired. The credit union will disclose the cost of this voluntary insurance to you. A separate insurance election which discloses the terms and conditions must be signed for coverage to become effective.

Applicant

NAME (Last - First - Initial) _____ MOTHER'S MAIDEN NAME _____

ACCOUNT NUMBER _____ SOCIAL SECURITY NUMBER _____

DRIVER'S LICENSE NUMBER / STATE _____ LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self) _____

BIRTH DATE _____ HOME PHONE _____ BUSINESS PHONE/ EXT. _____

E-MAIL ADDRESS _____

PRESENT ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

PREVIOUS ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:
 MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

Employment/Income

NAME AND ADDRESS OF EMPLOYER _____

TITLE/GRADE _____ 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 DO NOT CHOOSE TO HAVE IT CONSIDERED.

EMPLOYMENT INCOME _____ OTHER INCOME _____
 \$ _____ PER _____ \$ _____ PER _____
 NET GROSS SOURCE _____

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO
 WHERE _____ ENDING/SEPARATION DATE _____

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____ STARTING DATE _____
 _____ ENDING DATE _____

Other: Co-Applicant Spouse Guarantor

NAME (Last - First - Initial) _____ MOTHER'S MAIDEN NAME _____

ACCOUNT NUMBER _____ SOCIAL SECURITY NUMBER _____

DRIVER'S LICENSE NUMBER / STATE _____ LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self) _____

BIRTH DATE _____ HOME PHONE _____ BUSINESS PHONE/ EXT. _____

E-MAIL ADDRESS _____

PRESENT ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

PREVIOUS ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:
 MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

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 \$ _____ PER _____ \$ _____ PER _____
 NET GROSS SOURCE _____

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO
 WHERE _____ ENDING/SEPARATION DATE _____

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____ STARTING DATE _____
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