Note No.		

## W-BEE Federal Credit Union

Account No.	
Soc. Sec. No.	

## APPLICATION FOR LOAN

I,, hereby apply for a loan of \$ monthly/ installments of \$each include	for a period of months, to be repaid in		
I desire this loan for the following purpose (explain fully):	ing interest. I prefer the first payment to fail due on		
Co-makers or security offered (if any):  I hereby certify that all statements made, including those below, are true are other debts. The credit union is authorized to check my credit and employed.	ment history and to answer questions about its experience with me.		
Date Signature of Applicant	Address State		
This information, including appropriate signature(s), is to be filled in by eithis application.	ther the credit committee or loan officer, depending upon who acts upon		
On, 20, I/We approved a loan in the amount and (list any changes in amount, terms, or conditions):	l on the conditions requested by the above applicant, except as follows		
Approved by CREDIT COMMITTEE	Approved by LOAN OFFICER		
(All committee members shown as present in the minutes of the meeting at this application was approved must sign above.)	t which		
APPLICANT'S STATEMENT	CO-MAKER'S STATEMENT		
I am indebted to the following creditors (list all debts such as doctor bills, installments, loans, real estate mortgages, etc. Attach additional sheet if necessary.):	NAME OF CO-MAKER ADDRESS  I am indebted to the following creditors (list all debts such as doctor		
CREDITOR MO. PAYMENT AMT. OWING Mortgage	bills, installments, loans, real estate mortgages, etc. Attach additional sheet if necessary.):  CREDITOR MO. PAYMENT AMT. OWING		
Home EquityAuto	Mortgage		
Auto	Home Equity		
Other	Auto		
	AutoOther		
Employed By Address	Employed By Address		
Years Employed Position	Years Employed Position		
Salary (Gross Without Overtime) Business Phone \$ per	Salary (Gross Without Overtime) Business Phone \$		
Date of Birth Number of Dependents Home Phone (exclude self)	Date of Birth Number of Dependents Home Phone (exclude self)		
Auto(s) Owned Make Year Model	Auto(s) Owned Make Year Model		
Market Value Monthly	Market Value Monthly		
Own Residence \$ Rent Residence \$	Own Residence \$ Rent Residence \$		
Other Pertinent Information	Other Income		
	Relation to Applicant (if any)		
Other Income	Social Security Number I certify that the above statements are true and complete.		
	Date Signature of Co-Maker		