



Application Date _____ Note # _____ For _____ months
 Purpose of Loan _____
 Amount Requested \$ _____ Account# _____

I am applying for an individual account in my own name and am relying on my own income or assets and not on the income or assets of any other person as the basis for repaying this loan. Complete all sections, except Section B.

I am applying for an individual account, but am relying on income or assets from alimony, child support, or separate maintenance or on the income assets of another person as the basis for repaying this loan. Complete all sections, providing information in Section B concerning the individual on whose income you are relying.

I am applying for a joint account or an account which my co-borrower and I may use and request additional advances. Complete all sections. We understand we are individually and jointly responsible for repayment.

PAYMENT PROTECTION: INSURANCE COVERAGE SELECTION

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

- Single Credit Disability Insurance (Available on Applicant only)
- () Single or () Joint Credit Life Insurance (Only available on home equity loans; excludes any and all balloon loans including MAPS loans.)

Marital Status: (Complete only if you are applying for joint credit or secured credit.) Married applicants may apply for a separate account.

Applicant: () Married () Separated () Unmarried (single, divorced or widowed)

Co-Applicant: () Married () Separated () Unmarried (single, divorced or widowed)

SECTION A: APPLICANT/BORROWER INFORMATION

NAME		SOCIAL SECURITY NO.	BIRTHDATE
PRESENT HOME ADDRESS (Street, city, State, Zip)			() Own () Rent Since
PREVIOUS HOME ADDRESS (Street, city, State, Zip)			() Own () Rent Dates:
DRIVER'S LICENSE NO. (& State)	HOME TELEPHONE NO. ()	ALTERNATE PHONE # (CELL/WORK): ()	NO. DEPENDENTS _____ Ages

Current Employer	Position/Title/Grade	Gross Salary-() NET () GROSS \$ _____ per _____
Address (Street, City, State, Zip) & Telephone		Dates Employed
Previous Employer (If employed less than 5 years with current employer)	Position/Title/Grade	Dates Employed
Address (Street, City, State, Zip)		Telephone ()
NOTE: Alimony, Child Support, or Separate Maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this credit. FOR MILITARY: Is duty station transfer expected during year? () YES () NO. IF YES, WHERE ?		
TYPE OF OTHER INCOME	NAME OF PAYER	MONTHLY AMOUNT \$ _____
Alimony, Child Support, or Maintenance income RECEIVED BY: () Court Order () Written Agreement () Other		Is it likely that any income relied upon will be reduced in the next two years? () Yes () No

SECTION B: () CO-APPLICANT or CO-BORROWER INFORMATION () SPOUSE () GUARANTOR

NAME		SOCIAL SECURITY NO.	BIRTHDATE
PRESENT HOME ADDRESS (Street, city, State, Zip) - If information below is same as applicant, please write SAA			() Own () Rent Since
PREVIOUS HOME ADDRESS (Street, city, State, Zip)			() Own () Rent Dates
DRIVER'S LICENSE NO. (& State)	HOME TELEPHONE NO. ()	ALTERNATE PHONE # (CELL/WORK): ()	NO. DEPENDENTS _____ Ages

Current Employer	Position/Title/Grade	Gross Salary-() NET () GROSS \$ _____ per _____
Address (Street, City, State, Zip) & Telephone		Dates Employed
Previous Employer (If employed less than 5 years with current employer)	Position/Title/Grade	Dates Employed
Address (Street, City, State, Zip)		Telephone ()

SECTION B: CON'T () CO-APPLICANT or CO-BORROWER INFORMATION () SPOUSE () GUARANTOR

NOTE: Alimony, Child Support, or Separate Maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this credit. FOR MILITARY: Is duty station transfer expected during year? () YES () NO. IF YES, WHERE ?

TYPE OF OTHER INCOME	NAME OF PAYER	MONTHLY AMOUNT \$ _____
Alimony, Child Support, or Maintenance income RECEIVED BY: () Court Order () Written Agreement () Other		Is it likely that any income relied upon will be reduced in the next two years? () Yes () No

REFERENCES for APPLICANT

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	
RELATIONSHIP	HOME TELEPHONE NO. ()
NAME & ADDRESS OF FRIEND - NOT A RELATIVE	
HOME TELEPHONE NO. ()	MOTHER'S MAIDEN NAME

REFERENCES for CO-BORROWER/SPOUSE/GUARANTOR

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	
RELATIONSHIP	HOME TELEPHONE NO. ()
NAME & ADDRESS OF FRIEND - NOT A RELATIVE	
HOME TELEPHONE NO. ()	MOTHER'S MAIDEN NAME

All applicants please answer the following questions:

	Applicant		Co-Applicant	
	YES	NO	YES	NO
1. Are you liable for alimony, child support or maintenance payments? If yes, amount: \$ _____	()	()	()	()
2. Are you an endorser, guarantor, or co-maker for another? If yes, name & address of creditor:	()	()	()	()
3. Are there any outstanding judgments, garnishments, or legal proceedings against you? If yes, explain:	()	()	()	()
4. Have you filed for bankruptcy or had property foreclosed upon or had a debt adjustment plan confirmed under chapter 13? If yes, explain:	()	()	()	()

By signing this application below, you agree that:

- The information provided in this application is correct and complete to the best of your knowledge.
- You authorize the credit union to obtain credit reports in connection with this application for credit and for any subsequent updates, renewals and requests for advances. You understand that it is a federal crime to willfully or deliberately provide incomplete or incorrect information on loan applications made to Federal Credit Unions insured by NCUA.
- The credit union will retain this application whether or not it is approved.
- You are a member of the credit union.
- You have read this statement and understand it and agree to notify the credit union in writing immediately if there are any important changes. The credit union must also be notified of changes in name, address or employment within a reasonable time thereafter or when additional advance requests are made.

X _____
APPLICANT'S SIGNATURE DATE

X _____
CO-APPLICANT'S SIGNATURE DATE

This application should be used ONLY ONCE to establish your LoanLiner account. You do not have to complete it again for subsequent advances. Call the office for instructions. If you're applying for a closed-end loan not associated with your LoanLiner account, obtain a special application from our staff in either office.

FOR CREDIT UNION OFFICE USE ONLY:			
Application: () Approved () Denied	Deposit Acct. No. /	Processed By:	
	Check No.:		
LOAN NUMBER: (NOTE)	N:	() ECOA Notice and Reason for Rejection Sent on	
ACCOUNT NUMBER:			
APPROVED AMOUNT:	\$	Collateral:	
Comments:			
Credit Committee/Loan Officer Signature: _____			Date _____