

HOW TO APPLY

- Please complete sections 1 through 8
- Sign and complete section 9
- Return this application to your credit union
- An incomplete or unsigned form may delay processing

1 NOTE AND COMPLETE

Married Applicants may apply for a separate account.

NOTICE TO OHIO APPLICANTS: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy 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.

SIGNATURE FOR WISCONSIN RESIDENTS ONLY _____ DATE _____

Individual Credit: Complete Applicant section. Complete **Co-Applicant, Spouse** (referred to as "Other") section: (1) about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or (2) if your spouse will use the Account. Please check box to indicate whom the information is about.

Joint Credit: Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

Amount Requested \$ _____ **Purpose:** _____

Repayment: Payroll Deduction Cash Automatic Payment Military Allotment _____

STATEMENT OF INTENT

Are you interested in having your loan protected? Yes No

If you answer "yes," the Credit Union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions.

2 APPLICANT INFORMATION

APPLICANT		<input type="checkbox"/> CO-APPLICANT		<input type="checkbox"/> SPOUSE			
NAME (Last - First - Initial)		NAME (Last - First - Initial)		NAME (Last - First - Initial)			
DRIVER'S LICENSE NUMBER/STATE		DRIVER'S LICENSE NUMBER/STATE		DRIVER'S LICENSE NUMBER/STATE			
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER	ACCOUNT NUMBER	SOCIAL SECURITY NUMBER	ACCOUNT NUMBER	SOCIAL SECURITY NUMBER		
BIRTH DATE	HOME PHONE	CELL PHONE	BUSINESS PHONE/ EXT.	BIRTH DATE	HOME PHONE	CELL PHONE	BUSINESS PHONE/ EXT.
PRESENT ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT		PRESENT ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT	
PREVIOUS ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT		PREVIOUS ADDRESS (Street - City - State - Zip)		<input type="checkbox"/> OWN <input type="checkbox"/> RENT	
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:		<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)		COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:		<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)	
LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)		LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self)		LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self)		LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self)	

3 EMPLOYMENT INFORMATION

NAME AND ADDRESS OF EMPLOYER	NAME AND ADDRESS OF EMPLOYER	NAME AND ADDRESS OF EMPLOYER	
YOUR TITLE/GRADE	SUPERVISOR'S NAME	YOUR TITLE/GRADE	SUPERVISOR'S NAME
START DATE	HOURS AT WORK	IF SELF EMPLOYED, TYPE OF BUSINESS	
IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS		STARTING DATE	
ENDING DATE		ENDING DATE	
IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR	<input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE	ENDING/SEPARATION DATE

4 INCOME INFORMATION

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	EMPLOYMENT INCOME	OTHER INCOME
\$ PER	\$ PER	\$ PER	\$ PER
<input type="checkbox"/> NET <input type="checkbox"/> GROSS	SOURCE	<input type="checkbox"/> NET <input type="checkbox"/> GROSS	SOURCE

5 REFERENCES
Please include Street, City, State and Zip

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP
HOME PHONE	HOME PHONE	HOME PHONE	HOME PHONE
NAME AND ADDRESS OF PERSONAL FRIEND -NOT A RELATIVE	HOME PHONE	NAME AND ADDRESS OF PERSONAL FRIEND -NOT A RELATIVE	HOME PHONE

APPLICANT

OTHER (CO-APPLICANT, SPOUSE)

6A ASSETS/PROPERTY
Check box for Applicant/Other. List all assets and account number(s)—Attach other sheets if necessary.

SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY	SHARE DRAFT OR CHECKING AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY	
SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY	SAVINGS AMOUNT \$	NAME AND ADDRESS OF DEPOSITORY	
APPLICANT <input type="checkbox"/> OTHER	LIST HOME AND ALL OTHER ITEMS YOU OWN AND LOCATION OF PROPERTY For Example: Auto, Boat, Stocks, Bonds, Cash, Household Goods, Real Estate, etc.	MARKET VALUE	PLEGDED AS COLLATERAL FOR ANOTHER LOAN	
HOME*			\$	<input type="checkbox"/> YES <input type="checkbox"/> NO
			\$	<input type="checkbox"/> YES <input type="checkbox"/> NO
		\$	<input type="checkbox"/> YES <input type="checkbox"/> NO	

6B*
This section must be completed for the property which will be given as security, if applicable.

LIST EVERY LIEN AGAINST YOUR HOME
A lien is a legal claim filed against property as security for payment of a debt. Liens include mortgages, deeds of trust, land contracts, judgments and past due taxes.

FIRST MORTGAGE HELD BY	OTHER LIENS (Describe)
PRESENT BALANCE \$	
IS THE PROPERTY DESCRIBED IN THIS SECTION: YOUR PRINCIPAL DWELLING? LISTED AS THE APPLICANT'S ADDRESS IN THE "APPLICANT INFORMATION" SECTION?	IS ANYONE OTHER THAN YOUR SPOUSE A PART OWNER OF YOUR HOME?
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

7 DEBTS
In addition to Rent/Mortgage list all other debts (for example, auto loans, credit cards, second mortgage, home assoc. dues, alimony, child support, child care, medical, utilities, auto insurance, IRS liabilities, etc.) Please use a separate line for each credit card and auto loan. Attach other sheets if necessary.

APPLICANT <input type="checkbox"/> OTHER	CREDITOR NAME AND ADDRESS	ACCOUNT NUMBER	ORIGINAL BALANCE	PRESENT BALANCE	MONTHLY PAYMENT	IF PAST DUE ✓
<input type="checkbox"/> RENT <input type="checkbox"/> MORTGAGE (Incl. Tax & Ins.)			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED						
TOTALS			\$	\$	\$	

8 FINANCIAL INFORMATION
These questions apply to both Applicant and Other.

IF A "YES" ANSWER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET

DO YOU HAVE ANY OUTSTANDING JUDGMENTS? _____

HAVE YOU EVER FILED FOR BANKRUPTCY OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13? _____

HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN A DEED IN LIEU OF FORECLOSURE IN THE LAST 7 YEARS? _____

ARE YOU A PARTY IN A LAWSUIT? _____

ARE YOU OTHER THAN A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN? _____

IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS? _____

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): _____

APPLICANT		OTHER	
YES	NO	YES	NO

9 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 all your debts and obligations. 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. 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. You understand that it is a crime to willfully and deliberately provide incomplete or incorrect information in this application. If there are any important changes, you will notify us in writing immediately. You also agree to notify us of any change in your name, address or employment within a reasonable time thereafter.

X _____ **X** _____
APPLICANT'S SIGNATURE DATE OTHER SIGNATURE DATE

10 CREDIT UNION INFORMATION
Do not write in this section— for credit union use only. Check applicable box(es).

LOAN OFFICER ADVANCE APPROVED: YES NO COUNTER OFFER WILL BE MADE, IF ACCEPTED, ADVANCE APPROVED

CREDIT COMMITTEE OR OTHER OUTSIDE INFORMATION CONSIDERED: YES NO IF YES, ATTACH ADDITIONAL SHEET AND DESCRIBE

REFERRED TO/REASON(S) FOR REFERRAL: _____ \$ _____ APPROVED LIMIT _____ DEBT RATIO _____

DESCRIBE COUNTER OFFER: _____

SPECIFIC REASON(S) FOR REJECTION: _____

SIGNATURES: _____ DATE _____ DATE _____

LOAN OFFICER **X** _____ DATE _____ **X** _____ DATE _____

CREDIT COMMITTEE _____ DATE _____ _____ DATE _____

X _____ DATE _____ **X** _____ DATE _____

ECOA NOTICE AND REASON FOR REJECTION SENT OR DELIVERED ON _____ (DATE) BY _____ (INITIALS)

LOAN ORIGINATOR ORGANIZATION _____ NMLSR ID NUMBER _____

LOAN ORIGINATOR _____ NMLSR ID NUMBER _____