



Application

Married Applicants: May apply for a separate account.

- 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 (AZ, CA, ID, LA, NM, NV, TX, WA, WI),

your spouse will use th								
3. you are relying on your	spouse's income as a	a basis for repayment. If you	are relying on income from	om alimony, o	hild support, c	or separate maintenance		
		sible about the person on wo complete the appropriate sec			f the Applican	t mark the Co Applican		
box.	int must individually co	omplete the appropriate sec	tion below. If Co-borrows	ei is spouse o	т тпе Аррисан	t, mark the co-Applical		
Guarantor: Complete the C	Other section if you ar	e a guarantor on an account	:/loan.					
LOANLINER Account/Loan								
(Including ATM/Debit Card	Access to the Accou	ınt if Available)						
Amount Requested \$								
Purpose/Collateral:								
Repayment:								
PAYMENT PROTECTION	Are you intereste	ed in having your loan n	rotected? Ves	ĪΝο.				
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	If you answer "v	ed in having your loan p yes", then the credit u u. A separate election	nion will disclose the	cost of thi	s voluntary	payment		
	protection to yo	u. A separate election	which discloses the	terms and	conditions	must be		
	signed for protect	tion to be effective.						
		T						
APPLICANT			OTHER ☐ CO-APPLICANT ☐ SPOUSE ☐ O					
NAME			NAME					
MOTHER'S MAIDEN NAME	ACCOUNT NUM	IBER	MOTHER'S MAIDEN NAME		ACCOUNT NUMBER			
SOCIAL SECURITY NUMBER	DDIVEDIC LIGE	ISE NUMBER/STATE	COCIAL CECUPITY AUMADED		DDIVEDIC LICENIC	SE AULINADED/CTATE		
SOCIAL SECURITY NUMBER	DRIVER 5 LICE!	ISE NUMBER/STATE	SOCIAL SECURITY NUMBER	•	DRIVER'S LICENSE NUMBER/STATE			
AGES OF DEPENDENTS			AGES OF DEPENDENTS					
NOES OF BEFEREENTS			ACCO OF BEI ENBERTO					
BIRTH DATE HOME PHO	NE BUSINES:	S PHONE/EXT.	BIRTH DATE HOMI	E PHONE	BUSINESS F	PHONE/EXT.		
EMAIL ADDRESS			EMAIL ADDRESS					
PRESENT ADDRESS			PRESENT ADDRESS					
		LENGTH AT RESIDENCE				LENGTH AT RESIDENCE		
PREVIOUS ADDRESS			PREVIOUS ADDRESS					
FREVIOUS ADDRESS		LENGTH AT RESIDENCE	FREVIOUS ADDRESS			LENGTH AT RESIDENCE		
		LENGTH AT RESIDENCE				LENGTH AT RESIDENCE		
COMPLETE FOR JOINT OPERIT OF	CUIDED ODEDIT OD IE VOIL	IN E IN A COMMUNITY	COMPLETE FOR JOINT ORF	DIT CECUPED ON	DIT OD IF VOLUM	/E IN A COMMANDENTY		
COMPLETE FOR JOINT CREDIT, SE PROPERTY STATE:	ECURED CREDIT OR IF YOU	LIVE IN A COMMUNITY	COMPLETE FOR JOINT CREE PROPERTY STATE:	DIT, SECURED CRI	EDIT OR IF YOU LIV	VE IN A COMMUNITY		
MARITAL STATUS:			MARITAL STATUS:					
	Φ.			b				
EMPLOYMENT/INCOME	\$		EMPLOYMENT/INCOM	ME \$				
NAME AND			NAME AND	<u></u>				
ADDRESS OF EMPLOYER			ADDRESS OF EMPLOYER					
		T						
TITLE/GRADE	START DATE	HOURS AT WORK	TITLE/GRADE	STAR	T DATE	HOURS AT WORK		
SUPERVISOR'S NAME	IF SELF EMPLOYED, T	VADE OF BLICINIECE	SUPERVISOR'S NAME	IF CEI	E EMBLOVED TVE	DE OF BUCINESS		
SUPERVISOR S NAIVIE	IF SELF EIVIPLOYED, I	THE OF BUSINESS	SUPERVISOR S NAIVIE	IF SEL	F EMPLOYED, TYP	E OF BUSINESS		
NOTICE: ALIMONY, CHILD SUPPO	DT OD SEDADATE MAINTE	NANCE INCOME NEED NOT BE	MOTICE: ALIMONY CHILD S	SUIDDODT OD SED	ADATE MAINTENIA	ANCE INCOME NEED NOT BE		
	OT CHOOSE TO HAVE IT CO		REVEALED IF YOU					
OTHER INCOME			OTHER INCOME					
\$	SOURCE		\$		SOURCE			
SOURCE			\$	SOURCE				
¢	SOURCE SOURCE		\$		SOURCE			
Ψ		IEVE VEADO	•	N TO A NOTED EVO	SOURCE	VT VEADO		
MILITARY: IS DUTY STATION TRA		MILITARY: IS DUTY STATIO	IN TRANSFER EXP					
WHERE	ENDING	SEPARATION DATE	WHERE		ENDING/SI	EPARATION DATE		
PREVIOUS EMPLOYER NAME AND	ADDRESS IS EMPLOYED LE	SS THAN STARTING DATE	PREVIOUS EMPLOYER NAMI	E AND ADDRESS I	E EMDLOVED LESS	S THAN STARTING DATE		
FIVE YEARS	ADDRESS IF EMPLOYED LE	SS THAN STARTING DATE	FIVE YEARS	E AND ADDRESS I	F EINIPLOYED LESS	STHAIN STARTING DATE		
		ENDING DATE				ENDING DATE		
REFERENCE		RELATIONSHIP	REFERENCE			RELATIONSHIP		
NAME AND ADDRESS OF NEARES	T DEL ATIVE NOT LIVING W	TH VOII	NAME AND ADDRESS OF N	EADEST DELATIVE	NOT LIVING WITH	1 VOII		
NAME AND ADDRESS OF NEARES	T RELATIVE NOT LIVING WI	HOME PHONE	INVINIT WIND WODKE22 OF IN	LANLOI KELATIVE	. INOT LIVING WITE	HOME PHONE		

WHAT YOU OWE	CREDITOR (A	ION	N INTEREST RATE		BALANCE	MONTHLY PAYMENT	APPLICANT		
					\$		\$	APPLICANT	OTHER
					\$		\$		-
					-				
					\$		\$		
					\$		\$		_
					\$		\$		-
					\$		\$		
					\$		\$		
					\$		\$		
					\$		\$		
					\$		\$		1
					\$		\$		<u> </u>
					\$		\$		1
					\$		\$		+
							\$		-
LICT AND NAMES UNDER ME	HOLL VOLID ODEDIT DEFEDEA	IOSC AND ODEDIT HICTORY CAN DE CI	IFOKED	TOTALC	\$ \$		\$		+
LIST ANY NAMES UNDER WE	IICH YOUR CREDIT REFEREN	ICES AND CREDIT HISTORY CAN BE CH	HECKED:	TOTALS	Ф		Þ		
				_		DIEDCED	AS COLLATERAL	. I OWNEI	D DV
WHAT YOU OWN	LIST LOCAT	ION OF PROPERTY OR FINANCIAL INST	TITUTION	MARKET V	/ALUE		NOTHER LOAN	APPLICANT	
				\$					1
				\$					1
				\$					+
				\$					+
				<u> </u>					+
				\$					_
				\$					_
				\$					
				\$					
				\$					
OTHER INFORMATION	I AROUT VOII	T					_	L	1
		IF YOU ANSWER "YES" TO ANY O	UESTION OTHER 1	THAN #1, EXPLAIN	ON AN ATTA	ACHED SHEE	APPLICA	NT OT	HER
	N OR PERMANENT RESIDEN		FOR RANKELINTON	/ A DEDT AD.	UIOTA AFAIT D			_	
		JDGMENTS OR HAVE YOU EVER FILED FORECLOSED UPON OR REPOSSESSED							
IS YOUR INCOME LIKEL	Y TO DECLINE IN THE NEXT	TWO YEARS?							
4. ARE YOU A CO-MAKER	, CO-SIGNER OR GUARANTO	OR ON ANY LOAN NOT LISTED ABOVE?							
FOR WHOM (Name of C	thers Obligated on Loan):	TO V	VHOM (Name of Cr	reditor):					
STATE LAW NOTICES		ITS ONLY: The Ohio law		ion is furnished al knowledge o					
make credit equally av	ailable to all creditwo	nation require that all creditor rthy customers, and that credi	it account is	s opened. (2) P					
reporting agencies ma	aintain separate cred	it histories on each individua	al or loan w	ith your spous	e. The cr	edit being	g applied for,	if granted,	will be
upon request. The Or with this law.	ilo Civil Rights Comm	nission administers complianc	e incurrea ii	n the interest o	t the mar	rage or ta	amily of the u	inaersignea.	
WISCONSIN RESIDEN	TS ONLY: (1) No pro	ovision of any marital propert ction 766.59, or court decre	y X						
under Section 766.70	will adversely affect	the rights of the Credit Unio		FOR WISCONSIN RI	ESIDENTS O	VLY		DATE	
		SICI	MATURES						
			NATURES						
You promise that ever	ything you have state	ed in this application is correct t the above information is	t in this ap	pplication and the Credit Union					
complete listing of wh	at you owe. If there a	are any important changes yo	u bureau fro	om which it red	ceived a o	redit rep	ort on you. It	is a federa	al crime
will notify us in writi	ng immediately. You	authorize the Credit Union to is application for credit and for	o to willfull	y and deliberate ications made					
		n or collection of the credit		sured by NCUA		i credit u	illions of sta	te chartered	ı credii
received. You understa	and that the Credit Ur	nion will rely on the informatio	n	,					
		(05.41)						25.41.	
		(SEAL)	<u> </u>				(5	SEAL)	
APPLICANT'S SIGNATURE		DATE	OTHER SIGN	IATURE				DATE	
		FOR CRED	IT UNION USE	ONLY					
DATE	APPROVED	APPROVED SIGNATURE	LINE OF CREDIT	OTHER		OTHER		DEBT RATIO	
	DENIED	LIMITS: \$	\$	\$		\$		BEFORE	AFTER
(Adverse Action Notice Sent)	Ψ	Ψ	Ψ		Ψ			
LOAN OFFICER COMMENTS:									
SIGNATURES:			Χ						
		DATE	_					DATE	