



- 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

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.

Applicant	Other: <input type="checkbox"/> Co-Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Other
NAME (Last - First - Initial)	NAME (Last - First - Initial)
ACCOUNT NUMBER	ACCOUNT NUMBER
SOCIAL SECURITY NUMBER	SOCIAL SECURITY NUMBER
DRIVER'S LICENSE NUMBER / STATE	DRIVER'S LICENSE NUMBER / STATE
LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)	LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self)
BIRTH DATE HOME PHONE CELL PHONE BUSINESS PHONE/EXT.	BIRTH DATE HOME PHONE CELL PHONE BUSINESS PHONE/EXT.
E-MAIL ADDRESS	E-MAIL ADDRESS
PRESENT ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS	PRESENT ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS
PREVIOUS ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS	PREVIOUS ADDRESS (Street - City - State - Zip) <input type="checkbox"/> OWN <input type="checkbox"/> RENT YEARS AT THIS ADDRESS
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)
Employment/Income	Employment/Income
NAME AND ADDRESS OF EMPLOYER	NAME AND ADDRESS OF EMPLOYER
TITLE/GRADE START DATE HOURS AT WORK	TITLE/GRADE START DATE HOURS AT WORK
SUPERVISOR'S NAME IF SELF EMPLOYED, TYPE OF BUSINESS	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.	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 <input type="checkbox"/> NET <input type="checkbox"/> GROSS SOURCE	EMPLOYMENT INCOME OTHER INCOME \$ _____ PER \$ _____ PER <input type="checkbox"/> NET <input type="checkbox"/> GROSS SOURCE
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE ENDING/SEPARATION DATE	MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE ENDING/SEPARATION DATE
PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS STARTING DATE ENDING DATE	PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS STARTING DATE ENDING DATE

Applicant Reference	RELATIONSHIP	Other Reference	RELATIONSHIP
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	
	HOME PHONE		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 <small>(Include Tax and Ins.)</small>			\$	\$		
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	
			Applicant	Other	Applicant	Other	
HOME		\$	YES	NO			
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 _____
SIGNATURE FOR WISCONSIN RESIDENTS ONLY DATE

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 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 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.

X _____ (SEAL)	X _____ (SEAL)
APPLICANT'S SIGNATURE	OTHER SIGNATURE
DATE	DATE

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

The following insurance products are offered with our loans:

- **GAP INSURANCE** - There could be a big difference between what your insurance will pay and what you owe on your loan if your auto is totaled. *GAP is a low-cost coverage that pays the potentially high-cost difference between your insurance settlement and your loan balance on items directly related to the purchase of your vehicle, plus gives you \$1,000.00 towards the purchase of a replacement vehicle if financed with the Credit Union.*

- **CREDIT INSURANCE FOR YOUR LOANS:**
 - **CREDIT DISABILITY** – Single and Joint Credit Disability coverage is offered by the Credit Union. *This is a group insurance policy designed to make a member's monthly payments to the Credit Union if the member, or their co-signer if applicable, is totally and continuously disabled by a sickness or accident.* The premiums for coverage are paid by the member and added to the monthly loan payment. The maximum total benefit of this insurance is \$50,000, and the maximum issue age is 65 years.

 - **CREDIT LIFE** – Single and Joint Life insurance coverage is offered by the Credit Union. *This is a group insurance policy designed to pay off your loan in the event of death.* The premiums for coverage are paid by the member and added to the monthly loan payment. The maximum total benefit of this insurance is \$50,000, and maximum issue age is 69 years.

**** Check with your Credit Union for more information on these products.**