

# MY CREDIT UNION LOAN APPLICATION

WILL THIS LOAN BE SECURED BY A MEMBER SHARE ACCOUNT?

NO  YES

If you answer "yes," be sure to indicate which MY CREDIT UNION share account will serve as security for this loan.

I authorize you to use:

Assigned Savings Account Number: \_\_\_\_\_  Certificate Number: \_\_\_\_\_

As a pledge of security for the loan amount indicated below.

Check coverage(s) desired. The credit union will disclose the cost of these voluntary options to you. A separate form which discloses the terms and conditions must be signed for any coverage option(s) to become effective.

Single Credit Disability Insurance

GAP Coverage

Single Credit Life Insurance

Extended Vehicle Warranty

Joint Credit Life Insurance

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.

Account Type:  Individual  Joint

Repayment:  Cash  Automatic Payment

Amount Requested: \$ \_\_\_\_\_ Term Requested: (Max 72 months) \_\_\_\_\_

Purpose/Collateral Description: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Account Number: \_\_\_\_\_ SSN: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number(s): (H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Employment Income: \$ \_\_\_\_\_

Position/Title: \_\_\_\_\_ Years On Job: \_\_\_\_\_

Housing Expense: \$ \_\_\_\_\_  Rent  Own Child Care/Alimony Expense: \$ \_\_\_\_\_

Personal Reference Name & Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Personal Reference Name & Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Joint Applicant (If Applicable): \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Joint Address: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Joint Phone Number(s): (H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

Joint SSN: \_\_\_\_\_ Housing Expense: \$ \_\_\_\_\_  Rent  Own

Joint Applicant Employer: \_\_\_\_\_ Employment Income: \$ \_\_\_\_\_

Position/Title: \_\_\_\_\_ Years On Job: \_\_\_\_\_

Joint Email Address: \_\_\_\_\_

## 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 federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by the NCUA.

\_\_\_\_\_ (SEAL)

\_\_\_\_\_ (SEAL)

APPLICANT'S SIGNATURE

DATE

OTHER SIGNATURE

DATE