

**ALL APPLICANTS MUST ATTACH VERIFICATION OF INCOME (MOST RECENT PAY STUB) OR, IF SELF-EMPLOYED, YOUR MOST RECENT TAX RETURNS.**

**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, 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 **Co-Applicant** section to the extent possible about the person on whose payments you are relying.

**JOINT CREDIT: (CHECK BOX):**  **JOINT CREDIT** with  **SPOUSE**  **CO-BORROWER**. If applying with another person, complete the **CO-APPLICANT/OTHER** section.

APPLICANT		
★ SINGLE ★ JOINT ★ SHARE SECURED		
NAME (Last - First - Middle)	CREDIT LIMIT REQUESTED \$	
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER	
DRIVER'S LICENSE NUMBER	E-MAIL ADDRESS	
BIRTH DATE	HOME PHONE	MOTHER'S MAIDEN NAME
PRESENT ADDRESS (Street - City - State - Zip)		HOW LONG THERE
PREVIOUS ADDRESS (Street - City - State - Zip)		HOW LONG THERE
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)		

OTHER:		
<input type="checkbox"/> Co-Applicant <input type="checkbox"/> Spouse <input type="checkbox"/> Guarantor		
NAME (Last - First - Middle)	CREDIT LIMIT REQUESTED \$	
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER	
DRIVER'S LICENSE NUMBER / STATE	E-MAIL ADDRESS	
BIRTH DATE	HOME PHONE	MOTHER'S MAIDEN NAME
PRESENT ADDRESS (Street - City - State - Zip)		HOW LONG THERE
PREVIOUS ADDRESS (Street - City - State - Zip)		HOW LONG THERE
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			
NAME OF EMPLOYER			
ADDRESS OF EMPLOYER			
POSITION	START DATE	HOURS WORKED	BUSINESS PHONE / EXT.
HOW LONG EMPLOYED		IF SELF EMPLOYED, TYPE OF BUSINESS	
GROSS EMPLOYMENT INCOME \$ _____ PER _____		OTHER INCOME * \$ _____ PER _____	
SOURCE OF OTHER INCOME			
NAME of PREVIOUS EMPLOYER IF LESS THAN FIVE YEARS AT CURRENT EMPLOYER			
ADDRESS			
NAME AND ADDRESS of NEAREST RELATIVE NOT LIVING WITH YOU			

EMPLOYMENT / INCOME			
NAME OF EMPLOYER			
ADDRESS OF EMPLOYER			
POSITION	START DATE	HOURS WORKED	BUSINESS PHONE / EXT.
HOW LONG EMPLOYED		IF SELF EMPLOYED, TYPE OF BUSINESS	
GROSS EMPLOYMENT INCOME \$ _____ PER _____		OTHER INCOME * \$ _____ PER _____	
SOURCE OF OTHER INCOME			
NAME of PREVIOUS EMPLOYER IF LESS THAN FIVE YEARS AT CURRENT EMPLOYER			
ADDRESS			
RELATIONSHIP			

\*ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS BASIS FOR REPAYING THIS OBLIGATION.

**OBLIGATION / CREDIT REFERENCES - ATTACH A SECOND SHEET IF NECESSARY**

TYPE	DESCRIPTION	BALANCE	MONTHLY PAYMENT
MORTGAGE	Name of Bank or Credit Union		
RENT			
EQUITY LINE OF CREDIT			
CREDIT CARDS			
CREDIT CARDS			

TYPE	DESCRIPTION	BALANCE	MONTHLY PAYMENT
MORTGAGE	Name of Bank or Credit Union		
RENT			
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CREDIT CARDS			
CREDIT CARDS			

- |   |  |  |
|---|--|--|
| 1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?  | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 2. HAVE YOU EVER HAD A CAR OR OTHER PERSONAL PROPERTY REPOSSESSED BY A DEALER OR FINANCE COMPANY, FILED BANKRUPTCY, OR BEEN A PARTY TO A WAGE ASSIGNMENT OR COLLECTION, OR BEEN DENIED A LOAN BY THIS CREDIT UNION? | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3. ARE THERE ANY OUTSTANDING JUDGEMENTS AGAINST YOU? AMOUNT \$ _____ IF YES, TO WHOM OWED? _____  | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 4. ARE YOU A CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? FOR WHOM? (Name of Others Obligated on Loan) _____ TO WHOM (Name of Creditor) _____   | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |

-A CONSUMER CREDIT REPORT MAY BE REQUESTED IN CONNECTION WITH THIS APPLICATION AND/OR ANY RENEWAL, UPDATES OR EXTENSIONS OF ANY NEW CREDIT GRANTED AS A RESULT OF THIS APPLICATION. IN ORDER THAT THE CREDIT UNION MAY MAKE THE FAIREST DECISION POSSIBLE ABOUT THE GRANTING OF CREDIT, IT MAY BE NECESSARY TO ASK FOR ADDITIONAL INFORMATION RELATIVE TO CURRENT DEBT BEFORE NEW CREDIT CAN BE ISSUED.

-ADDITIONALLY, IN ACCORDANCE WITH SECTION 326 OF THE USA PATRIOT ACT, YOU AUTHORIZE US TO VERIFY AND RECORD INFORMATION THAT IDENTIFIES EACH PERSON WHO OPENS AN ACCOUNT. YOU FURTHER AUTHORIZE US TO CHECK YOUR ACCOUNT, CREDIT, AND EMPLOYMENT HISTORY, AND OBTAIN A CREDIT REPORT FROM THIRD PARTIES, INCLUDING CREDIT REPORTING AGENCIES, TO VERIFY YOUR ELIGIBILITY FOR ANY ACCOUNT OR SERVICES YOU REQUEST.

-YOU UNDERSTAND THAT THE CREDIT UNION WILL RELY ON THE INFORMATION IN THIS APPLICATION AND YOUR CREDIT REPORT IN MAKING 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 UNION OR STATE CHARTERED CREDIT UNIONS INSURED BY NCUA.

**- BY AFFIXING MY SIGNATURE TO THIS APPLICATION, I PRESENT INFORMATION TRULY AND CORRECTLY TO THE BEST OF MY KNOWLEDGE AND FOR THE PURPOSE OF OBTAINING CREDIT FROM THE CREDIT UNION AND, WHEN APPLICABLE APPLICATION FOR CREDIT LIFE AND/OR CREDIT DISABILITY INSURANCE.**

APPLICANT - MEMBER _____	DATE _____	CO-APPLICANT - MEMBER _____	DATE _____
ISSUE CARD(S) AS FOLLOWS: _____		ISSUE CARD(S) AS FOLLOWS: _____	

FOR CREDIT UNION USE ONLY	
CREDIT COMMITTEE/LOAN OFFICERS SIGNATURE _____	DATE _____
_____	<input checked="" type="checkbox"/> APPROVED
_____	<input type="checkbox"/> REJECTED
CREDIT LIMIT \$ _____	

DETACH AGREEMENT AND RETAIN FOR YOUR RECORDS