

ALIA NT CREDIT UNION HOME EQUITY CREDIT APPLICATION

LOAN

Amount Requested \$	For How Long?	Credit Union Acct. No.
Legal Description of Property:		
Credit Life Insurance (some restrictions apply) <input type="checkbox"/> Yes <input type="checkbox"/> No	Co-owner(s) of Security:	Proceeds of Loan to be Used for:

APPLICANT

NAME	BIRTHDATE	SOCIAL SECURITY NO.
HOME ADDRESS	CITY, STATE, ZIP	YRS. THERE PHONE NO.
PREVIOUS ADDRESS (if less than 2 yrs. at present address)		NO. OF DEPENDENT CHILDREN
EMPLOYER		YRS. THERE WORK PHONE
OCCUPATION/POSITION	GROSS INCOME \$	PER
OTHER INCOME \$ PER SOURCES: Include Alimony, Child Support, Separate Maintenance only if you wish this to be considered as a basis for repayment.		
PREVIOUS EMPLOYER/ADDRESS (if less than 2 yrs. at present employer)	OCCUPATION/POSITION THERE	YRS. THERE
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU.		RELATIONSHIP

Complete Only if: for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property state.

CO-APPLICANT

CO-APPLICANT'S NAME	BIRTHDATE	SOCIAL SECURITY NO.
HOME ADDRESS	CITY, STATE, ZIP	YRS. THERE PHONE NO.
PREVIOUS ADDRESS (if less than 2 yrs at present address)		NO. OF DEPENDENT CHILDREN
EMPLOYER/ADDRESS		YRS. THERE WORK PHONE
OCCUPATION/POSITION	GROSS INCOME \$	PER
OTHER INCOME \$ PER SOURCES: Include Alimony, Child Support, Separate Maintenance only if you wish this to be considered as a basis for repayment.		
PREVIOUS EMPLOYER/ADDRESS (if less than 2 yrs. at present employer)	OCCUPATION/POSITION THERE	YRS. THERE

This section should be filled out for all applicants. Please mark Applicant information with an "A" and Co-Applicant information with a "C." Mark loans that will be paid off with proceeds with an "X."

FINANCIAL

DEBTS	Description/Financial Inst.	Balance	Monthly Pymt.	ASSETS	Description	Value
	Mortgage/Rent				Home	
	Auto Loan				Auto	
	Auto Loan				Auto	
	Credit Card				Savings	
	Credit Card				Others (401K, investments, etc.)	
	Others:					

Please submit a separate sheet if additional space is needed.

SIGNATURES

Complete the following section about both the Applicant and Joint-Applicant or other Persons (if applicable).

Are you obligated to make Alimony, Child Support, or Maintenance Payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, to: _____	Amt. Per Mo. \$ _____
Are you a co-maker, endorser, or guarantor on any loan or contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, to whom? _____
Are there any unsatisfied judgments against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, to whom owed and amount? _____
Have you been declared bankrupt in the last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where and what year? _____

I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below, I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I must update credit information at your request if my financial conditions change.

Applicant Signature and Date	Joint-Applicant Signature and Date
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SEE OTHER SIDE FOR GOVERNMENT MONITORING INFORMATION

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

APPLICANT: I do not wish to furnish this information. Initials _____		CO-APPLICANT: I do not wish to furnish this information. Initials _____	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Ethnicity: (select only one) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		Ethnicity: (select only one) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	
Race (select one or more) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black, or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White		Race (select one or more) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black, or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White	

* For Credit Union Use Only *	
Installment Loans	Line of Credit Loans
Loan No. _____ Refinanced Amt. (Ln. # _____) \$ _____ New Proceeds (Check Amt.) _____ Other Chgs. NF <input type="checkbox"/> FF <input type="checkbox"/> \$ _____ CL premium _____ Amount Financed \$ _____ Finance Chg. for _____ Mos. Int. Rate _____ % \$ _____ TOTAL PAYMENT \$ _____ _____ Installments of \$ _____ _____ Installments of \$ _____ First Payment Due Date: _____ Payment Frequency: <input type="checkbox"/> Monthly Cash <input type="checkbox"/> Monthly Direct Deposit <input type="checkbox"/> Bi-Weekly Direct Deposit <input type="checkbox"/> Monthly Transfer _____ (day of mo.) AOCH/TRCH	Loan No. _____ CREDIT LIMIT: \$ _____ Daily Interest Factor _____ Annual Percentage Rate _____ Minimum Payment <input type="checkbox"/> Bi-Weekly _____ Minimum Payment <input type="checkbox"/> Monthly _____ First Payment Due Date _____ Credit Life Ins. <input type="checkbox"/> Yes <input type="checkbox"/> No AMOUNT OF INITIAL ADVANCE To Member \$ _____ To Pay of Ln. # \$ _____ TOTAL \$ _____ First Review Date: _____

Dated: _____

Processed: _____

Date: _____

APPROVED

DISAPPROVED

Loan Officer/Credit Manager Signature(s)

Comments:
