



- 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

Payment Protection

Single Credit Disability Insurance Single Credit Life Insurance Joint Credit Life Insurance

Check coverage(s) desired. The credit union will disclose the cost of this voluntary insurance to you. A separate insurance election which discloses the terms and conditions must be signed for coverage to become effective.

Applicant

NAME (Last - First - Initial) _____

ACCOUNT NUMBER _____ SOCIAL SECURITY NUMBER _____

DRIVER'S LICENSE NUMBER / STATE _____ LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self) _____

BIRTH DATE _____ HOME PHONE _____ CELL PHONE _____ BUSINESS PHONE/ EXT. _____

E-MAIL ADDRESS _____

PRESENT ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

PREVIOUS ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

Other: Co-Applicant Spouse Other

NAME (Last - First - Initial) _____

ACCOUNT NUMBER _____ SOCIAL SECURITY NUMBER _____

DRIVER'S LICENSE NUMBER / STATE _____ LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self) _____

BIRTH DATE _____ HOME PHONE _____ CELL PHONE _____ BUSINESS PHONE/ EXT. _____

E-MAIL ADDRESS _____

PRESENT ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

PREVIOUS ADDRESS (Street - City - State - Zip) _____ OWN RENT
 YEARS AT THIS ADDRESS _____

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:
 MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:
 MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

Employment/Income

NAME AND ADDRESS OF EMPLOYER _____

TITLE/GRADE _____ START DATE _____ HOURS AT WORK _____

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.

EMPLOYMENT INCOME _____ OTHER INCOME _____
 \$ _____ PER _____ \$ _____ PER _____

NET GROSS SOURCE _____

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO
 WHERE _____ ENDING/SEPARATION DATE _____

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____ STARTING DATE _____
 _____ ENDING DATE _____

Employment/Income

NAME AND ADDRESS OF EMPLOYER _____

TITLE/GRADE _____ START DATE _____ HOURS AT WORK _____

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.

EMPLOYMENT INCOME _____ OTHER INCOME _____
 \$ _____ PER _____ \$ _____ PER _____

NET GROSS SOURCE _____

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO
 WHERE _____ ENDING/SEPARATION DATE _____

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____ STARTING DATE _____
 _____ ENDING DATE _____

