

Married Applicants: May apply for a separate account.

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.

<input type="checkbox"/> LOANLINER Account/Loan: <input type="checkbox"/> Individual <input type="checkbox"/> Joint <i>(Including ATM/Debit Card Access to the Account if Available)</i> Amount Requested \$ _____ Purpose/Collateral: _____ Repayment: <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Cash <input type="checkbox"/> Military Allotment <input type="checkbox"/> Automatic Payment	<input type="checkbox"/> Credit Card Account: <input type="checkbox"/> Individual <input type="checkbox"/> Joint Credit Limit Requested \$ _____ If Authorized User, Name: _____
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PAYMENT PROTECTION	Are you interested in having your loan protected? <input type="checkbox"/> Yes <input type="checkbox"/> 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.
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APPLICANT	OTHER
NAME _____	NAME _____
ACCOUNT NUMBER _____	ACCOUNT NUMBER _____
SOCIAL SECURITY NUMBER _____	SOCIAL SECURITY NUMBER _____
DRIVER'S LICENSE NUMBER/STATE _____	DRIVER'S LICENSE NUMBER/STATE _____
AGES OF DEPENDENTS _____	AGES OF DEPENDENTS _____
EMAIL ADDRESS _____	EMAIL ADDRESS _____
BIRTH DATE _____ HOME PHONE _____ CELL PHONE _____ BUSINESS PHONE/EXT. _____	BIRTH DATE _____ HOME PHONE _____ CELL PHONE _____ BUSINESS PHONE/EXT. _____
PRESENT ADDRESS (Street - City - State - Zip) _____	PRESENT ADDRESS (Street - City - State - Zip) _____
<input type="checkbox"/> OWN <input type="checkbox"/> RENT	<input type="checkbox"/> OWN <input type="checkbox"/> RENT
LENGTH AT RESIDENCE _____	LENGTH AT RESIDENCE _____
PREVIOUS ADDRESS (Street - City - State - Zip) _____	PREVIOUS ADDRESS (Street - City - State - Zip) _____
<input type="checkbox"/> OWN <input type="checkbox"/> RENT	<input type="checkbox"/> OWN <input type="checkbox"/> RENT
LENGTH AT RESIDENCE _____	LENGTH AT RESIDENCE _____
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 \$ _____ Per _____	EMPLOYMENT INCOME \$ _____ Per _____
<input type="checkbox"/> NET <input type="checkbox"/> GROSS	<input type="checkbox"/> NET <input type="checkbox"/> GROSS
SOURCE _____	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 _____	PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____ STARTING DATE _____
ENDING DATE _____	ENDING DATE _____
REFERENCE	REFERENCE
RELATIONSHIP _____	RELATIONSHIP _____
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU _____ HOME PHONE _____	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU _____ HOME PHONE _____

APPLICANT	OTHER
NAME _____	NAME _____
ACCOUNT NUMBER _____	ACCOUNT NUMBER _____
SOCIAL SECURITY NUMBER _____	SOCIAL SECURITY NUMBER _____
DRIVER'S LICENSE NUMBER/STATE _____	DRIVER'S LICENSE NUMBER/STATE _____
AGES OF DEPENDENTS _____	AGES OF DEPENDENTS _____
EMAIL ADDRESS _____	EMAIL ADDRESS _____
BIRTH DATE _____ HOME PHONE _____ CELL PHONE _____ BUSINESS PHONE/EXT. _____	BIRTH DATE _____ HOME PHONE _____ CELL PHONE _____ BUSINESS PHONE/EXT. _____
PRESENT ADDRESS (Street - City - State - Zip) _____	PRESENT ADDRESS (Street - City - State - Zip) _____
<input type="checkbox"/> OWN <input type="checkbox"/> RENT	<input type="checkbox"/> OWN <input type="checkbox"/> RENT
LENGTH AT RESIDENCE _____	LENGTH AT RESIDENCE _____
PREVIOUS ADDRESS (Street - City - State - Zip) _____	PREVIOUS ADDRESS (Street - City - State - Zip) _____
<input type="checkbox"/> OWN <input type="checkbox"/> RENT	<input type="checkbox"/> OWN <input type="checkbox"/> RENT
LENGTH AT RESIDENCE _____	LENGTH AT RESIDENCE _____
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 _____
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EMPLOYMENT INCOME \$ _____ Per _____	EMPLOYMENT INCOME \$ _____ Per _____
<input type="checkbox"/> NET <input type="checkbox"/> GROSS	<input type="checkbox"/> NET <input type="checkbox"/> GROSS
SOURCE _____	SOURCE _____
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PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____ STARTING DATE _____	PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS _____ STARTING DATE _____
ENDING DATE _____	ENDING DATE _____
REFERENCE	REFERENCE
RELATIONSHIP _____	RELATIONSHIP _____
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU _____ HOME PHONE _____	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU _____ HOME PHONE _____