Home Equity Application

| NOTE AND COMPLETE NOTICE TO OHIO APPLICANTS: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights | | | | | | | | | |
|--|---------------------|---------------------|-----------------------------|--------------------------------|---|--------------------|---------------------|------------|---------------------------|
| Commission administers | | | n of | any marital property of | aroomont unilatoral state | mont undo | r Saction 766 5 | | count docroo undor |
| WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or count decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has | | | | | | | | | |
| actual knowledge of its | terms, before | e the credit is o | rant | ed or the account is or | bened. (2) Please sign if yo | ou are not a | applying for this | accou | int or loan with your |
| spouse. The credit bein | g applied for, | if granted, will | be ir | ncurred in the interest o | f the marriage or family of t | he undersig | gned. | | , |
| Signature For Wisconsin Re | sidents Only | | | Date | | | | | |
| | Sidents Only | | | Date | | | | | |
| | | | | | | | | | |
| X | | | | | | | | | |
| | | | | | | | | | |
| Married Applicants ma | | | | | | | | | |
| Individual Credit: C | omplete App | olicant section | . Cor | mplete Co-Applicant, | Spouse, (referred to as "O | ther") secti | on: (1) about yo | ur spo | ouse if you live in a |
| | state (AZ, C | A, ID, LA, NM | , NV | /, TX, WA, WI), or (2) | if your spouse will use th | e Account. | Please check b | oox to | indicate whom the |
| information is about. | | | | | | | | | |
| | pplicant must | individually co | omple | ete the appropriate secti | on below. If Co-Borrower is | spouse of t | he Applicant, ma | rk the | Co-Applicant box. |
| Amount Requested \$ | | Purpose: | | | | | | | |
| Repayment: Payr | oll Deduction | Cash | | Automatic Payment | Military Allotment | | | | |
| STATEMENT OF II | | | had in | having your loop prote | ected? | No | | | |
| If you answer "yes" the | credit union y | vill disclose the | | t to protect your loan protect | he protection is voluntary a | | t affect your loar | annr | oval. In order for |
| your loan to be covered. | vou will nee | d to sign a sep | arate | application that explain | is the terms and conditions | | t alleet your loar | | |
| APPLICANT INFO | | | | | | O-APPL | | | SPOUSE |
| NAME (Last - First - Initial) | | | 1111 | | NAME (Last - First - Initial) | | | | SFUUSE |
| | | | | | | | | | |
| DRIVER'S LICENSE NUMBER/S | STATE | | | BIRTH DATE | DRIVER'S LICENSE NUMBER/S | TATE | | | BIRTH DATE |
| | | | | | | | | | |
| ACCOUNT NUMBER | | SOCIAL SECURIT | 'Y NUI | MBER | ACCOUNT NUMBER | | SOCIAL SECURIT | Y NUMB | BER |
| | | | | | | | | | |
| HOME PHONE | CELL PHONE | | BUS | SINESS PHONE/EXT. | HOME PHONE | CELL PHON | IE | BUSI | NESS PHONE/EXT. |
| EMAIL ADDRESS | | | | | EMAIL ADDRESS | | | | |
| EMAIL ADDRESS | | | | | EMAIL ADDRESS | | | | |
| PRESENT ADDRESS (Street - 0 | City Ototo Zin) | | ENT | LENGTH AT RESIDENCE | PRESENT ADDRESS (Street - Ci | | | NT | LENGTH AT RESIDENCE |
| PRESENT ADDRESS (Street - C | Jily - State - Zip) | | | LENGTH AT RESIDENCE | PRESENT ADDRESS (Street - Ci | ity - State - Zip, | | | LENGTH AT RESIDENCE |
| | | | | | | | | | |
| | | | | | | | | | |
| PREVIOUS ADDRESS (Street - | City - State - Zip |) 🗌 OWN 🗌 R | ENT | LENGTH AT RESIDENCE | PREVIOUS ADDRESS (Street - C | City - State - Zip |) 🗌 OWN 🗌 RE | NT | LENGTH AT RESIDENCE |
| | | | | | | | | | |
| | | | | | | | | | |
| COMPLETE FOR JOINT CRED | T, SECURED CF | REDIT OR IF YOU L | IVE IN | N A | COMPLETE FOR JOINT CREDIT | | REDIT OR IF YOU LI | VE IN A | |
| COMMUNITY PROPERTY STATE: | | | | | | _ | | D . | |
| MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed) | | | | | MARRIED SEPARA | | UNMARRIED (Single | | ced - Widowed) |
| LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT | | | | | LIST AGES OF DEPENDENTS N (Exclude Self) | IOT LISTED BY | OTHER APPLICAN | | |
| (Exclude Self) | | | | | | | | | |
| EMPLOYMENT IN | | ON | | | | - | | | |
| NAME AND ADDRESS OF EMP | LOYER | | | | NAME AND ADDRESS OF EMPL | OYER | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | SUPERVISOR'S NA | 45 | |
| YOUR TITLE/GRADE | | SUPERVISOR'S N | | | YOUR TITLE/GRADE | | SUPERVISOR'S NA | VIE | |
| START DATE HOURS | AT WORK | IF SELE EMPLOY | יד חד | YPE OF BUSINESS | START DATE HOURS A | TWORK | IF SELF EMPLOYED | TYPE | OF BUSINESS |
| | | | , . | | | | | , | |
| IF EMPLOYED IN CURRENT PO | | | COM | PLETE | IF EMPLOYED IN CURRENT PO | | | COMPLE | ETE |
| PREVIOUS EMPLOYER NAME | AND ADDRESS | | | | PREVIOUS EMPLOYER NAME A | AND ADDRESS | 6 | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| STARTING DATE | ENDING DATE | | STARTING DATE ENDING DATE | | | | | | |
| MILITARY: IS DUTY STATION | ECTED DURING N | EAR YES NO | MILITARY: IS DUTY STATION T | RANSFER EX | PECTED DURING NE | XT YEA | R YES NO | | |
| WHERE | | ENDING/SEPAR | | N DATE | WHERE | | ENDING/SEPARA | TION D | DATE |
| INCOME INFORM | | | | | | | | | |
| NOTICE: Alimony, child suppo | | aintenance income r | need n | ot be revealed if you do not | NOTICE: Alimony, child support | , or separate m | aintenance income n | eed not l | be revealed if you do not |
| choose to have it cor | | | | · · | choose to have it cons | | | | · |
| EMPLOYMENT INCOME \$ | | PER | | NET GROSS | EMPLOYMENT INCOME \$ | | PER | | NET GROSS |
| OTHER INCOME \$ | PER | | | | OTHER INCOME \$ | PE | R | | |
| SOURCE | | | | | SOURCE | | | | |

| REFERENCES Please include Street, City, State and Zip. | | | | | | | NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | | | | | | | | | |
|---|--------------|--|--------------|--|-----------|----------|--|----------|---------------------|-------------|----------------|------------|----------|-----|-------|--|
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| RELATIONSHIP HOME PHONE NAME AND ADDRESS OF PERSONAL FRIEND - NOT A RELATIVE | | | | | | | RELATIONSHIP | | SS OF PERSONAL FR | | HOME PHON | | | | | |
| | | | | | | | | 2 | | | | - | | | | |
| | | | | HOME PHON | IE | | | | | | | | HOME PHO | ONE | | |
| ASSETS/PROPERTY Check box for Applicant/Other. List all asset APPLICANT | | | | | | ets a | and accoun | nt n | OTHER (C | O-Al | PPLICANT, SF | POUS | - | | | |
| SHARE DRA CHECKING | | NAME AND ADDRES | S OF DEPOS | SITORY | | 0 | SHARE DRAFT CHECKING AM | | | DRESS | S OF DEPOSITOR | ſ | | | | |
| \$ | | NAME AND ADDRES | S OF DEPOS | BITORY | | | \$ | | NAME AND ADD | DRESS | S OF DEPOSITOR | Y | | | | |
| SAVINGS AN \$ | MOUNT | | | | | | SAVINGS AMOUNT \$ | | | | | | | | | |
| APPLICANT | OTHER | ASSET TYP | E | LIST HOME AND ALL OTH For Example: Auto, Boat, St | | | | | | MARKET VALU | E | PLEDGED AS | | | | |
| | | HOME* | | | | | | | | \$ | | | YES | | NO | |
| | | | | | | | | | | | \$ | | YES | | NO | |
| *LIST EVER | | SAINST YOUR HOME | This section | must be completed for the pro | nertv wh | hich y | will be given as | ser | urity if applicable | | \$ | | YES | | NO | |
| | gal claim fi | led against property as se | | ment of a debt. Liens include mo | ortgages, | deed | | cont | | ast due | e taxes. | | | | | |
| | | | | | | | ENO (Describe) | | | | | | | | | |
| PRESENT B | | | TION: YOUR | PRINCIPAL DWELLING? | | S | NO | | | | | | | | | |
| | | HAN YOUR SPOUSE A F | | | | | NO | | | | | | | | | |
| | | | | ant INFORMATION" SECTION? st all other debts (for (| | ES [| | <u> </u> | adit cards seco | nd i | mortagae ho | mo | | | imony | |
| DEDIS | _ child | support, child ca | are, medio | cal, utilities, auto insur | | | | | | | | | | | | |
| APPLICANT | | Attach other she | | essary. OR NAME AND ADDRESS | 400 | 2011 | NT NUMBER | _ | ORIGINAL BALANCE | PRE | SENT BALANCE | MO | | л Г | | |
| _ | _ | RENT | GREDH | | 701 | 5001 | IT NOWDER | | | | | | | | | |
| | | MORTGAGE (incl. Tax & Ins.) | | | | | | \$ | ; | \$ | | \$ | | | | |
| | | | | | | | | \$ | i | \$ | | \$ | | | | |
| | | | | | | | | \$ | i | \$ | | \$ | | | | |
| | | | | | | | | \$ | | \$ | | \$ | | | | |
| | | | | | | | | \$ | | \$ | | \$ | | | | |
| | | | | | | | | \$ | i | \$ | | \$ | | | | |
| LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHE | | | | | ECKI | ED TOTAL | s \$ | i | \$ | | \$ | | | | | |
| | | NFORMATION | | e questions apply to bo | th App | olica | ant and Oth | ner. | | | OTHER | _ | | | | |
| | | IS GIVEN TO A QUESTION OUTSTANDING JUDGME | | N ON AN ATTACHED SHEET | | | | _ | YES NO | | YES NO | | | | | |
| | | | | BT ADJUSTMENT PLAN CONFIR | MED UN | DER | CHAPTER 13? | _ | | | | | | | | |
| HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN A DEED IN LIEU OF FORECLOSURE IN THE L | | | | | | ΉE L | AST 7 YEARS? | _ | | | | | | | | |
| ARE YOU A PARTY IN A LAWSUIT? | | | | | | | | | | | | | | | | |
| | | AN A U.S. CITIZEN OR P | | | | | | | | | | | | | | |
| | | ELY TO DECLINE IN TH | | | /F? | | | | | | | | | | | |
| ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? | | | | | | | | | | | | | | | | |
| SIGNA | TURE | S | | | | | | | | | | | | | | |
| 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 all your debts and obligations. 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. You understand that it is a crime to willfully and deliberately provide incomplete or incorrect information in this application. If there are any important changes, you will notify us in writing immediately. You also agree to notify us of any change in your name, address or employment within a reasonable time thereafter. | | | | | | | | | | | | | | | | |
| Applicant's Signature Date Other Signature | | | | | | | | | | Date | | | | | | |
| | ÷ | | | | | | | | | | | | | | | |
| X | (SEAL) | | | | | | | | | | | | | | | |

| CREDIT UNION INFORM | IATION | | | | | |
|----------------------------------|---------------------------------|--------|------------------------------|-------------------------------|---------|------|
| LOAN OFFICER | ADVANCE APPROVED: YES NO | COL | INTER OFFER WILL BE MADE, IF | ACCEPTED, ADVANCE APPROVED | | |
| CREDIT COMMITTEE OR OTHER | OUTSIDE INFORMATION CONSIDERED: | ES 🗍 N | IO IF YES, ATTACH | ADDITIONAL SHEET AND DESCRIBE | | |
| | \$ APPROVED LIMIT | | DEBT RATIO | | | |
| REFERRED TO/REASON(S) FOR REFE | | | | | | |
| | | | | | | |
| DESCRIBE COUNTER OFFER: | | | | | | |
| SPECIFIC REASON(S) FOR REJECTION | ۷: | | | | | |
| SIGNATURES: DOAN OFFICER | CREDIT COMMITTEE | | | | | |
| Cirreture | | Data | Cianatura | | | Data |
| Signature | | Date | Signature | | | Date |
| | | | | | | |
| | (SEAL) | | | | (SEAL) | |
| | (31/12) | | | | (36/12) | |
| Signature | | Date | Signature | | | Date |
| | | | 5 | | | |
| | | | | | | |
| X | (SEAL) | | | | (SEAL) | |
| | REJECTION SENT OR DELIVERED ON | | (DATE) BY | (INITIALS) | | |
| | | | | (| | |
| LOAN ORIGINATOR ORGANIZATIO | N | | NMLSR ID NUMBER | | | |
| | | | | | | |
| LOAN ORIGINATOR | | | NMLSR ID NUMBER | | | |