

To Be Completed By Treas.

Share Balance \_\_\_\_\_

Loan Balance \_\_\_\_\_

Loan Status \_\_\_\_\_

# Montoursville Area FCU

Credit Union

Account No. \_\_\_\_\_

Note No. \_\_\_\_\_

## APPLICATION FOR LOAN

Soc. Sec. No. \_\_\_\_\_

Home Phone \_\_\_\_\_

Name of Applicant (print name) \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I hereby apply for a loan of \$ \_\_\_\_\_ for a period of \_\_\_\_\_ weeks \_\_\_\_\_ months to be repaid in \_\_\_\_\_  weekly  bi-weekly  semi-monthly  monthly  
 installments of \$ \_\_\_\_\_ each  including interest  plus interest.

I prefer the first payment to fall due on \_\_\_\_\_ I desire this loan for the following purpose (explain fully): \_\_\_\_\_

Collateral Offered  None  Shares \$ \_\_\_\_\_ Auto/Make \_\_\_\_\_ I.D. No. \_\_\_\_\_ Year \_\_\_\_\_

Other (Describe) \_\_\_\_\_

Owner(s) of Collateral \_\_\_\_\_

Are you relying on income from another person to repay this loan?

No  Yes Name \_\_\_\_\_

Address \_\_\_\_\_  
 I am indebted to the following creditors (List all debts such as doctor bills, real estate, automobile, repairs, furniture, installments, loans, etc. Attach additional sheet if necessary):

Indicate with an "X" those obligations you will pay with the proceeds of this loan.

To Whom Owed (Name & Address)	Original Amount	Monthly Payment	Balance

I hereby affirm and represent that my total indebtedness and liabilities on this date are listed above and do not exceed \$ \_\_\_\_\_

Number of dependents (Exclude self) \_\_\_\_\_

Are you liable for alimony, child support or separate maintenance payments?  No  Yes \$ \_\_\_\_\_/Month

Employer \_\_\_\_\_

Address \_\_\_\_\_

Date Employed \_\_\_\_\_ Date of Birth \_\_\_\_\_

Position \_\_\_\_\_

Clock or Office Payroll No. \_\_\_\_\_ Phone & Ext. \_\_\_\_\_

Weekly/Monthly Salary \$ \_\_\_\_\_

Previous Employer \_\_\_\_\_

Length of Service \_\_\_\_\_

Other personal income (do **not** include alimony, child support or separate maintenance payments) \$ \_\_\_\_\_ Source \_\_\_\_\_

You need not disclose the following sources of income; but if you want the credit union to consider such income in connection with this loan application, please complete the following:

Alimony \$ \_\_\_\_\_ Child Support \$ \_\_\_\_\_

Separate Maintenance Payments \$ \_\_\_\_\_

Complete the following only if you have chosen to disclose alimony, child support, or separate maintenance income:

Person Liable \_\_\_\_\_

Address \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Date employed \_\_\_\_\_ Position \_\_\_\_\_

Weekly/Monthly Salary \$ \_\_\_\_\_

How long have alimony, child support or separate maintenance payments been made? \_\_\_\_\_

Are all payments up to date?  Yes  No

Complete the following only if you reside in a community property state (Arizona, California, Idaho, Louisiana, New Mexico, Nevada, Texas, Washington or Wisconsin):

Married  Separated  Unmarried

Auto Owned, Make \_\_\_\_\_

Year \_\_\_\_\_ Ser. or Mtr. No. \_\_\_\_\_

2nd Auto Owned, Make \_\_\_\_\_

Year \_\_\_\_\_ Ser. or Mtr. No. \_\_\_\_\_

Drivers License Number \_\_\_\_\_ State \_\_\_\_\_

Real Estate owned at reasonable market value \$ \_\_\_\_\_

Location \_\_\_\_\_

Name of Landlord \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_

List all addresses for past five years

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parents or nearest relative (Not spouse)

(If renewal, add new references)

Name (Relationship) Address

Name Address

Have you any Judgments, Garnishments, or Legal Proceedings against you? If "Yes" explain

Bank Reference — Checking & Savings

Have you ever been through Bankruptcy? Year Are you a comaker/guarantor on any other loans? Amount \$ If so, for whom

Additional Information

I hereby certify that all statements made, including those on the reverse side hereof, are true and complete and submitted for the purpose of obtaining credit. I have no other debts. The credit union is authorized to check my credit and employment history and to answer questions about its experience with me.

If a co-maker is required, also use co-maker Form CM-2 Rev. 3-77

Signature Date

THIS SECTION FOR OFFICE USE ONLY

Name Date Acct. No.

Check Made Payable To: \$ Amount

Total Loan \$ If Renewal, Amt. Wanted \$ Terms

Share & Loan Vaca. Xmas Total Purpose of Loan: Auto Finance S.P.

Names of Co-maker(s), Guarantor(s) Trade Cash Dealer Ins. O.B.

Share Bal. \$ Loan Bal. \$ (1) \$ (2)

Collateral Credit Union No. Shift Loan Value Total Registration Verified by Yes No

Remarks

Information below, including appropriate signature(s) is to be filled in by either the credit committee or loan officer, depending upon who acts upon this application. On (Date) (I) (We) approved a loan in the amount and on the conditions requested by the above applicant, except as follows (list any changes in amount, terms, or conditions):

Approved by CREDIT COMMITTEE

Approved by LOAN OFFICER:

(All committee members shown as present in the minutes of the meeting at which this application was approved should sign above.)

If application is rejected — reason for rejection