

CREDIT UNION LOAN APPLICATION

Date _____ Name _____ Acct. No. _____

I N S T R U C T I O N S	You may apply for individual or joint credit, but check only one of the following boxes. <input type="checkbox"/> Individual Credit - unmarried applicant. Complete only the left hand columns on both sides of this form and other sections as they apply. <input type="checkbox"/> Individual Credit - married applicant. If both you and your spouse are residents of Wisconsin, complete both the left and right hand columns. If you or your spouse are not a Wisconsin resident, complete only the left hand column. <input type="checkbox"/> Joint Credit - with your spouse. Complete the left and right hand columns on both sides of this form and other sections as they apply. <input type="checkbox"/> Joint Credit - with another applicant or cosigner who is not your spouse. Each of you must complete a separate application. If both you and your spouse are Wisconsin residents include information about your spouse in the right hand column.
	NOTICE TO MARRIED APPLICANT: No provision of a marital property agreement, a unilateral statement under Wis. Stat. sec. 766.59 or a court decree under Wis. Stat. sec. 766.70 adversely affects the interests of the credit union unless prior to the time the credit is extended, the credit union is furnished with a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision when the obligation to the credit union is incurred.

L O A N	I/we hereby apply for: <input type="checkbox"/> A direct loan of \$ _____ no. of payments _____ amount of payments \$ _____ Purpose (must be completed) _____ <input type="checkbox"/> A credit line of \$ _____ *If checked, see attached Addendum which is incorporated here by reference.	CREDIT INSURANCE INFORMATION: Credit life or credit disability insurance is not required to obtain credit. If you wish to be considered for credit insurance on the loan for which you are applying, please complete the information below. I <input type="checkbox"/> Do <input type="checkbox"/> Do not want credit disability insurance for myself We <input type="checkbox"/> Do <input type="checkbox"/> Do not want joint credit disability insurance I <input type="checkbox"/> Do <input type="checkbox"/> Do not want credit life insurance for myself We <input type="checkbox"/> Do <input type="checkbox"/> Do not want joint credit life insurance NOTE: THIS IS NOT A BINDING CONTRACT FOR CREDIT INSURANCE.
	Collateral offered: _____ Titled in name(s) of: _____ Address: _____ Insured by: _____ Collateral offered: _____ Titled in name(s) of: _____ Address: _____ Insured by: _____	

APPLICANT	SPOUSE
IF INFORMATION IS IDENTICAL TO APPLICANT WRITE "SAME" Complete this section only if you and your spouse are Wisconsin Residents.	

P E R S O N A L	Complete only if you are a Wisconsin resident or if you are applying for secured credit. <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (Single/Divorced/Widowed) <input type="checkbox"/> Legally Separated by court order	last	first	middle		
	Present street address	Length of residence	Present street address	Length of residence	Present street address	Length of residence
	City / state / zip	County of residence	City / state / zip	County of residence	City / state / zip	County of residence
	Landlord or mortgage holder	Rent or mortgage pymt. \$	Landlord or mortgage holder	Rent or mortgage \$	Landlord or mortgage holder	Rent or mortgage \$
	Landlord or mortgage holder address	Landlord's telephone	Landlord or mortgage holder address	Landlord's telephone	Landlord or mortgage holder address	Landlord's telephone
	Previous address (if under 2 years at present)	Length of residence	Previous address (if under 2 years at present)	Length of residence	Previous address (if under 2 years at present)	Length of residence
	City / state / zip	Your	City / state / zip	Your birthdate	City / state / zip	Your birthdate
	Driver's license	Social Security	Driver's license no.	Social Security no.	Driver's license no.	Social Security no.
Relationship to joint applicant (if any)	Your home telephone	Status of spouse regarding this loan <input type="checkbox"/> joint applicant <input type="checkbox"/> not a joint applicant	Spouse's home telephone	Status of spouse regarding this loan <input type="checkbox"/> joint applicant <input type="checkbox"/> not a joint applicant	Spouse's home telephone	

E M P L O Y M E N T	Present employer	Length of	Present employer	Length of employment
	Position	Telephone	Position	Telephone
	Supervisor	Clock / badge no.	Supervisor	Clock / badge no.
	Employer's address		Employer's address	
	Previous employer (if under 2 years at present)	Length of	Previous employer (if under 2 years at present)	Length of employment
	Previous employer's address		Previous employer's address	

I N C O M E	Present net income from employment	Ages of dependents	Present net income from employment	Ages of dependents
	\$ _____ per		\$ _____ per	
	Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If revealed, it is being received <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement		Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If revealed, it is being received <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement	
	Type of income (alimony, child support or separate maintenance)	Monthly amount \$	Type of Income (alimony, child support or a separate maintenance)	Monthly Amount \$
	Name / address / phone of payor		Name / address / phone of payor	
	Other income	Source	Other Income	Sourc
\$ _____ per		\$ _____ per		
Is any income listed in this section likely to be reduced in the next 2 years or before the credit requested is repaid? <input type="checkbox"/> Yes (explain in detail on a separate sheet) <input type="checkbox"/> No		Is any income listed in this section likely to be reduced in the next 2 years or before the credit requested is repaid? <input type="checkbox"/> Yes (explain in detail on a separate sheet) <input type="checkbox"/> No		

R E F E R E N C E S	Institution holding your checking account	Checking account	Institution holding your checking	Checking account no.
	Institution holding your savings	Savings account	Institution holding your savings	Savings account no.
	Nearest relative not living with	Relationship	Nearest relative not living with	Relationship
	Address	Telephone	Address	Telephone
	Other relative not living with	Relationship	Other relative not living with	Relationship
	Address	Telephone	Address	Telephone

APPLICANT

SPOUSE

IF INFORMATION IS IDENTICAL TO APPLICANT WRITE "SAME"

List all debts and credit accounts (medical bills, auto loans, repairs, charge accounts, credit cards, etc.). Show them even though the present balance may be zero. Include any disputed debts and also any loans or contracts on which you are a co-maker, co-signer or guarantor. If any account listed below is not carried in your name, then state the name under which it's carried. Use a separate sheet if necessary. Place a "Y" for yes, an "N" for no next to the debt to show whether or not it is past due. Omitting debts for which you are liable is grounds for denial of the loan application.

DEBTS

Y/N	Creditor	Account Number	Balance	Mo. Pyt.	Y/N	Creditor	Account Number	Balance	Mo. Pyt.
	This Credit Union		\$	\$		This Credit Union		\$	\$
TOTAL					TOTAL				
For whom are you co-signed on a loan?			Name of institution		For whom are you co-signed on a loan?			Name of institution	
Have you had any judgment(s) filed against you?			Amount \$		Have you had any judgement(s) filed against you?			Amount \$	
Have you ever claimed bankruptcy? Which court?			Year filed		Have you ever claimed bankruptcy? Which court?			Year filed	

ASSETS

Type of Asset	Market Value	Outstanding Loan	Type of Asset	Market Value	Outstanding Loan
Savings & checking balances	\$	\$	Savings & checking balances	\$	\$
Real estate (location, date aquired)			Real estate (location, date acquired)		
Automobile (year, make, model)			Automobile (year, make, model)		
Other (describe)			Other (describe)		
Other (describe)			Other (describe)		
Other (describe)			Other (describe)		

I/we certify that this information on all pages has been supplied truthfully, accurately and voluntarily, and therefore authorize this credit union to investigate our creditworthiness, credit history and financial responsibility through any credit bureau or by any other reasonable means for consideration for the loan applied for hereon, or for any other service offered by this credit union or its affiliate. The credit union may release information about its credit experience with me/us. If this application is for the purpose of encumbering real property, I/we agree to pay all allowable expenses incurred in processing this application whether or not the loan is approved. This application does not constitute a contract for the extension of credit. I/we understand that it may be a Federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, as applicable under the provisions of Title 18, United States Code, Section 1014.

Applicant's Signature _____ (Seal) _____ Date _____ Spouse Signature (If joint applicant) _____ (Seal) _____ Date _____

COMPLETE THIS SECTION ONLY IF YOU ARE MARRIED AND YOU ARE APPLYING FOR CREDIT SEPARATE FROM SPOUSE

I certify that the credit being applied for, if granted, will be incurred or obtained in the interest of the marriage or family. This statement is made in accordance with Wis. Stat. sec. 766.55(1).

Applicant's Signature _____ (Seal) _____ Date _____

IF THIS SECTION APPLIES, WE ARE REQUIRED BY WISCONSIN LAW TO NOTIFY YOUR SPOUSE BY MAIL IF YOUR LOAN IS GRANTED.

DO NOT WRITE BELOW FOR CREDIT UNION USE ONLY

NAME CREDITOR	DATE MADE	AMOUNT	NO. MONTHS	PAYMENT	BALANCE	DATE LAST PAID	SECURITY	HOW PAID

Original Term of Loan	A&H _____	C.L. _____	DEBT RATIO (including this loan)	Date Note _____	APR _____ %	Filing Fees \$ _____
No. Mos. Elapsed (remaining)	_____	_____	total monthly debt	Amount Requested \$ _____	Amount of Note \$ _____	Prepaid Finance Charge \$ _____
Original Premium	\$ _____	\$ _____	total monthly income (use gross or net)	Present Balance \$ _____	Finance Charge { Interest + pre-pd. F/C	\$ _____
Refund	\$ _____	\$ _____	\$ _____ =	Int. Due to Date \$ _____	Amount Financed { Note - pre-pd. F/C	\$ _____
New Premium	\$ _____	\$ _____	% _____	AH } If refinance, add Net Amt. to note.	Total of Payments	\$ _____
Premium Difference	\$ _____	\$ _____		CL } Otherwise add gross.		

LOAN OFFICER _____ OR _____ CREDIT COMMITTEE

Total Credit Approved: \$ _____ Notice to spouse required? Yes No Date sent _____ By (Initials) _____

DESCRIBE COUNTER OFFER (If Any): _____

SPECIFIC REASON(S) FOR DENIAL: _____

Conditions for approval, or comments	Credit committee	Date
	1. _____	
	2. _____	
	3. _____	

ECOA notice and reason for denial sent or delivered on _____ (Date) By _____ (Initials)