



217-278-7700
toll free 877-67-UIECU
fax 217-244-5789

Fast Loan\$

Subsequent Loan & Line of Credit Advance Request

This application is for current Fast Loan\$ Plan holders who wish to be considered for an advance under their plan.

Name _____

Account # _____ Sub # _____

Social Security # _____

Daytime Phone # _____ Home Phone # _____

e-mail address _____

Purpose of loan: _____

Amount requested: \$ _____ Months to repay: _____

Gross Annual Income*: \$ _____ of Co-Applicant*: \$ _____

Any new credit since your last advance? Yes No If Yes, please list: _____

Creditor #1 Institution name: _____

Account #: _____

Balance Owed: \$ _____

Monthly Payment: \$ _____

Creditor #2 Institution name: _____

Account #: _____

Balance Owed: \$ _____

Monthly Payment: \$ _____

Any changes in employment or marital status since last advance? Yes No

Please explain changes: _____

If approved, would you prefer: Deposit in account # _____ Check

Comments: _____

**If your current gross annual income has changed since your last advance, you may be required to verify your new income.*

Agreement

By signing this application for credit, you warrant the truth of the information being listed and transmitted. You understand that the credit union will rely on the information in this request and in your credit report to make the decision whether or not to grant the credit applied for. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on requests made to Federal Credit Unions or State Chartered Credit Unions insured by the NCUA. You hereby authorize us, our employees and agents to investigate and verify any information provided to us by you. If this is a joint application, you agree that any liability is joint. You understand that we may require your signature on additional documents prior to disbursing any credit proceeds. You also agree to notify us of any change in your name, address or employment within a reasonable time thereafter.

For current information on rates and terms, please call UIECU at 217-278-7700 or write to PO Box 500, Champaign IL 61824-0500

Applicant's Signature **X** _____ Date _____

Co-Applicant's Signature **X** _____