

River Community Credit Union
 644 W Second St
 Ottumwa IA 52501
 641-684-6302 888-647-6744
 FAX: 641-684-7921 www.rivercommunitycu.org

Loan Application
 (PLEASE COMPLETE IN INK)

ACCOUNT NUMBER

Married persons may apply for an individual account.

IMPORTANT: READ THIS SECTION CAREFULLY BEFORE CHECKING THE APPROPRIATE BOX(S).
INDIVIDUAL CREDIT. Complete sections A, C and D. Complete information about your spouse (section B) if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI) or if your spouse will use the Account, or information about the person making payments if you are relying on alimony, spousal support, child support or separate maintenance as a basis for repayment of the credit requested.
JOINT CREDIT. Complete all sections with information about you and your Other Applicant.

This account to be an: INDIVIDUAL CREDIT JOINT CREDIT CO-MAKER

LOAN REQUEST

I AM REQUESTING:

- UNSECURED CREDIT OF \$ _____
 SECURED CREDIT OF \$ _____

SECURITY TO BE _____

- AN UNSECURED LINE OF CREDIT OF \$ _____
 INITIAL ADVANCE TO BE \$ _____
 A SHARE SECURED LINE OF CREDIT OF \$ _____
 INITIAL ADVANCE TO BE \$ _____
 A CLOSED-END LOAN OF \$ _____

The purpose of the loan I have requested is _____

A. BORROWER

NAME (Last, Jr/Sr, First, Initial)		SOC. SEC. NO.
CURRENT STREET ADDRESS	YRS.	OWN/RENT
CITY	STATE	ZIP
FORMER STREET ADDRESS	YRS.	OWN/RENT
CITY	STATE	ZIP
HOME PHONE NO.	DRIVER'S LICENSE NO.	STATE
DATE OF BIRTH	Complete for joint, secured credit or if you live in a community property state. <input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED	NO. OF DEPENDENTS (EXCLUDING SELF)

B. CO-MAKER/NON-APPLICANT CO-BORROWER

NAME (Last, Jr/Sr, First, Initial)		SOC. SEC. NO.
CURRENT STREET ADDRESS	YRS.	OWN/RENT
CITY	STATE	ZIP
FORMER STREET ADDRESS	YRS.	OWN/RENT
CITY	STATE	ZIP
HOME PHONE NO.	DRIVER'S LICENSE NO.	STATE
DATE OF BIRTH	Complete for joint, secured credit or if you live in a community property state. <input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED	NO. OF DEPENDENTS (EXCLUDING SELF)

A. BORROWER

EMPLOYER			
ADDRESS	CITY	STATE	
POSITION OR JOB TITLE	SUPERVISOR		
TELEPHONE NO.	STARTING DATE	MO.	SALARY
FORMER EMPLOYER			
ADDRESS	CITY	STATE	
POSITION OR JOB TITLE	SUPERVISOR		
TELEPHONE NO.	STARTING DATE	ENDING DATE	

B. CO-MAKER/NON-APPLICANT CO-BORROWER

EMPLOYER			
ADDRESS	CITY	STATE	
POSITION OR JOB TITLE	SUPERVISOR		
TELEPHONE NO.	STARTING DATE	MO.	SALARY
FORMER EMPLOYER			
ADDRESS	CITY	STATE	
POSITION OR JOB TITLE	SUPERVISOR		
TELEPHONE NO.	STARTING DATE	ENDING DATE	

OTHER INCOME. YOU NEED NOT LIST INCOME FROM ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE UNLESS YOU WISH IT CONSIDERED FOR PURPOSES OF GRANTING THIS CREDIT.

TYPE OF OTHER INCOME	MONTHLY AMOUNT
	\$
TYPE OF OTHER INCOME	MONTHLY AMOUNT
	\$
IS ANY INCOME LISTED LIKELY TO BE REDUCED BEFORE THE CREDIT REQUESTED IS PAID OFF? <input type="checkbox"/> YES <input type="checkbox"/> NO	

TYPE OF OTHER INCOME	MONTHLY AMOUNT
	\$
TYPE OF OTHER INCOME	MONTHLY AMOUNT
	\$
IS ANY INCOME LISTED LIKELY TO BE REDUCED BEFORE THE CREDIT REQUESTED IS PAID OFF? <input type="checkbox"/> YES <input type="checkbox"/> NO	

