

## Application

**Married Applicants:** May apply for a separate account.

**Individual Credit:** You must complete the **Applicant** section about yourself and the **Other** section about your spouse if:

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI),
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.

**Joint Credit:** Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

**Guarantor:** Complete the **Other** section if you are a guarantor on an account/loan.

**LOANLINER Account/Loan:**

(Including ATM/Debit Card Access to the Account if Available)

Amount Requested \$

Purpose/Collateral:

Repayment:

**Credit Card Account:**

(See Disclosure Table or Agreement for Terms)

Credit Limit Requested \$

If Authorized User, Name:

**PAYMENT PROTECTION**

30 DAY ELIMINATION PERIOD DISABILITY YES  NO   
 SINGLE LIFE YES  NO   
 JOINT LIFE YES  NO

Are you interested in having your loan protected?  Yes  No  
 If you answer "yes", then the credit union will disclose the cost of this voluntary payment protection to you. A separate election which discloses the terms and conditions must be signed for protection to be effective.

**APPLICANT**

NAME	
MOTHER'S MAIDEN NAME	ACCOUNT NUMBER
SOCIAL SECURITY NUMBER	DRIVER'S LICENSE NUMBER/STATE
AGES OF DEPENDENTS	EMAIL ADDRESS
BIRTH DATE	CELL PHONE BUSINESS PHONE/EXT.
PRESENT ADDRESS	LENGTH AT RESIDENCE
PREVIOUS ADDRESS	LENGTH AT RESIDENCE
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:	
MARITAL STATUS:	

<b>EMPLOYMENT/INCOME</b>	\$	PER
NAME AND ADDRESS OF EMPLOYER		
TITLE/GRADE	START DATE	HOURS AT WORK
SUPERVISOR'S NAME	IF SELF EMPLOYED, TYPE OF BUSINESS	

**NOTICE:** ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

OTHER INCOME	\$	PER	SOURCE
	\$	PER	SOURCE
	\$	PER	SOURCE
	\$	PER	SOURCE

**MILITARY:** IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR?  
 WHERE \_\_\_\_\_ ENDING/SEPARATION DATE \_\_\_\_\_

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS	STARTING DATE
	ENDING DATE

**REFERENCE**

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP
	HOME PHONE

**OTHER**

NAME	
MOTHER'S MAIDEN NAME	ACCOUNT NUMBER
SOCIAL SECURITY NUMBER	DRIVER'S LICENSE NUMBER/STATE
AGES OF DEPENDENTS	EMAIL ADDRESS
BIRTH DATE	CELL PHONE BUSINESS PHONE/EXT.
PRESENT ADDRESS	LENGTH AT RESIDENCE
PREVIOUS ADDRESS	LENGTH AT RESIDENCE
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:	
MARITAL STATUS:	

<b>EMPLOYMENT/INCOME</b>	\$	PER
NAME AND ADDRESS OF EMPLOYER		
TITLE/GRADE	START DATE	HOURS AT WORK
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