

Loan Application Form

Location	on	Ir	nformation Here	in Applies to:
☐ Main Office ☐	Branch Office		Member [Non-Member
Name		Account Number	Social Sec	curity Number
Address				
Street Address		ress Line 2		
City	State	e		
Zip	Phor	ne		
ears at present address Amount Rec		Requested	Purpose of Lo	an
			☐ New Auto	☐ Bill Consolidation
Live at home	Number	of Payments	☐ Used Auto	☐ Signature
☐ Yes ☐ No			☐ Home Equity	
☐ Rent ☐ Own			☐ Home Equity	
Monthy Rent				
Flavar	V			
Employer	Years of serv	/ice		
Supervisor	Your positio	n		
Address				
, taur ess				
Street Address	Ado	dress Line 2		
City		te		
Zip	Pho	ne		
Previous Employer	Your positio	n		
<u> </u>	1			



Name of nearest relative n	ot living with y	/ou				
Address						
Street Address	Address	Line 2		<u></u>		
City	State					
Zip	Phone					
Income						
			7			
Monthly Gross	Monthly Net		_	Number of Dependents		
Other Income						
]			
Monthly Gross	Monthly Net					
INCOME MUST BE VERIFIED BY Your loan application CANNOT						
Overtime income cannot be co	nsidered unless V	W2 for the previ	ious y	year is attached.		
If other income is listed, it musincome or Federal Tax Schedu			ub, F	ederal Tax Schedule E for rental		
Note: Alimony, child support or separa calculating your debt ratio for this loa		me need Not be rev	/ealed	if you do not with them considered as income in		
Disability Insurance	Mont	hly Transfer	Payn	nent from Shares		
☐ Yes ☐ No	☐ Ye	s 🗌 No				
Payroll Deduction Paymen	t Paym	ent from Dire	ect D	Deposit (ACH)		
☐ Yes ☐ No	☐ Ye	s 🗌 No				
Choose all that apply:						
☐ Outstanding Judgments	☐ Non-US Citi	zen				
☐ Bankruptcy	☐ Anticipated Income Reduction					
☐ Pending Lawsuits	☐ Co-Maker or Endorser					
☐ Foreclosed Property						