

CREDIT UNION LOAN APPLICATION FOR WISCONSIN RESIDENTS

Date _____ Name _____ Acct. No. _____

Last First Middle

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. Individual Credit. Complete applicant columns on both sides of this form. If you are married and a resident of Wisconsin, also complete the right hand columns about your spouse. Only the applicant signs on page 2. Joint Credit - with your spouse as joint applicant. Complete the left and right hand columns on both sides of this form. Both joint applicant spouses sign on page 2.			
	We intend to apply for joint credit. X _____ X _____ <p style="text-align: center;">Applicant Co-Applicant</p> Joint Credit - with another applicant, other than your spouse. Each of you must complete a separate application. Either applicant who is a Wisconsin resident must include information about their spouse in the right hand columns of their separate application, and sign it on page 2 as an applicant. I intend to apply for joint credit with: _____ X _____ <p style="text-align: center;">Applicant</p>			
	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: A direct loan of \$ _____ No. of payments: _____ Amount of payments: \$ _____ Purpose: _____ * A credit line of \$ _____ *If checked, see attached Addendum, incorporated herein by reference.		The credit union may offer either credit life/disability or debt cancellation/debt suspension coverage, but neither is required to obtain credit. If you notify the credit union that you are interested, the credit union will disclose the cost of this voluntary coverage to you. You must sign a separate election disclosing the terms and conditions for any coverage to become effective.	
			I am a student at an institution of higher education <i>and</i> I live on campus or within 1000 feet of a campus border.	
	Collateral offered: _____	Titled in name(s) of: _____	Address: _____	Insured by: _____
	Collateral offered: _____	Titled in name(s) of: _____	Address: _____	Insured by: _____

APPLICANT	SPOUSE <small>IF INFORMATION IS IDENTICAL TO APPLICANT WRITE "SAME" Complete this section only if you and your spouse are Wisconsin residents.</small>
------------------	--

P E R S O N A L	Complete only if you are a Wisconsin resident.				Name	Last	First	Middle				
	Married Unmarried (single/divorced/widowed) Legally separated											
	Present street address				Length of residence		Present street address				Length 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 pymt. \$	
	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	
	City / state / zip				Your birthdate		City / state / zip				Your birthdate	
	Driver's license no. State Exp. date				Social Security no.		Driver's license no. State Exp. date				Social Security no.	
Relationship to joint applicant (if any)				Your home telephone		Status of spouse regarding this loan joint applicant not a joint applicant				Spouse's home telephone		

E M P L O Y M E N T	Present employer				Length of employment		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 employment		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 income from employment				Net Gross		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 under: Court order Written agreement 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 under: Court order Written agreement Oral agreement					
	Type of income (alimony, child support or separate maintenance)				Monthly amount \$		Type of income (alimony, child support or separate maintenance)				Monthly amount \$	
	Name / address / phone of payor						Name / address / phone of payor					
	Other income \$ _____ per				Source		Other income \$ _____ per				Source	
Is any income listed in this section likely to be reduced in the next 2 years or before the credit requested is repaid? Yes (explain in detail on a separate sheet) No						Is any income listed in this section likely to be reduced in the next 2 years or before the credit requested is repaid? Yes (explain in detail on a separate sheet) No						

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

APPLICANT

SPOUSE

(IF INFORMATION IS IDENTICAL TO APPLICANT WRITE "SAME")

List all debts, obligations 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 each 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. Pymt.	Y/N	Creditor	Account Number	Balance	Mo. Pymt.
	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 judgment(s) filed against you?	Amount \$
Have you ever claimed bankruptcy? Which court?	Year filed	Have you ever claimed bankruptcy? Which court?	Year filed
Are you obligated to make child support payments?	Amount \$	Are you obligated to make child support payments?	Amount \$

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 acquired)			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)		

Loan originator organization name	Organization NMLSR ID No.	Loan originator name	Originator NMLSR ID No.
-----------------------------------	---------------------------	----------------------	-------------------------

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 herein, 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 as permitted by law. 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 _____ Date _____ Spouse's Signature (Only if joint applicant) _____ 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 _____ 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

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) total monthly debt / total monthly income (use gross or net)	Date of note _____	APR _____ %	Filing fees \$ _____
No. mos. elapsed (remaining)	_____	_____		Amount requested \$ _____	Amount of note \$ _____	Prepaid finance charge \$ _____
Original premium	\$ _____	\$ _____	=	Present balance \$ _____	Int. due to date \$ _____	Finance charge {Interest+pre-pd. F/C} \$ _____
Refund	\$ _____	\$ _____		Int. to date \$ _____	Amount financed {Note - pre-pd. F/C} \$ _____	Total of payments \$ _____
New premium	\$ _____	\$ _____		CL } Amt. to note. Otherwise add gross.		
Premium difference	\$ _____	\$ _____				

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 signatures	Date
	1. _____	
	2. _____	
Loan officer signature	Date	3. _____

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