

Application

A table that includes required credit card disclosures is on a separate document provided with this Application. To obtain any change in the required information since it was printed, write to us at the address stated on this 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: 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), your spouse will use the account, or 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 Guarantor: Complete the Other section if you are a guarantor on an account/loan. Loan Processor: Application Number: Number Of Months: First Payment Due: To be repaid: ☐ LOANLINER Account/Loan: ☐ Individual ☐ Joint □ Credit Card Account: □ Individual □ Joint (Including ATM/Debit Card Access to the Account if Available) Amount Requested \$ Credit Limit Requested \$ Purpose/Collateral: If Authorized User, Name: Repayment: Payroll Deduction Cash ☐ Military Allotment ☐ Automatic Payment Are you interested in having your loan protected? Yes No (payment protection not available on credit card accounts) If you answer "yes", the credit union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions. Check coverage(s) desired. The credit union will disclose the cost of this voluntary insurance to you. A separate insurance election which discloses the Single Credit Disability Insurance Single Credit Life Insurance Joint Credit Disability Insurance Joint Credit Life Insurance terms and conditions must be signed for coverage to become effective. APPLICANT OTHER ☐ CO-APPLICANT ☐ SPOUSE ☐ OTHER NAME NAME ACCOUNT NUMBER ACCOUNT NUMBER SOCIAL SECURITY NUMBER DRIVER'S LICENSE NUMBER/STATE SOCIAL SECURITY NUMBER DRIVER'S LICENSE NUMBER/STATE AGES OF DEPENDENTS EMAIL ADDRESS AGES OF DEPENDENTS EMAIL ADDRESS BIRTH DATE HOME PHONE BUSINESS PHONE/EXT. BIRTH DATE HOME PHONE BUSINESS PHONE/EXT. PRESENT ADDRESS (Street - City - State - Zip) PRESENT ADDRESS (Street - City - State - Zip) OWN RENT OWN RENT LENGTH AT RESIDENCE FNGTH AT RESIDENCE PREVIOUS ADDRESS (Street - City - State - Zip) PREVIOUS ADDRESS (Street - City - State - Zip) OWN RENT OWN RENT LENGTH AT RESIDENCE LENGTH AT RESIDENCE COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed) MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed) **EMPLOYMENT/INCOME EMPLOYMENT/INCOME** NAME AND ADDRESS OF NAME AND ADDRESS C EMPLOYER ADDRESS C EMPLOYER TITLE/GRADE START DATE HOURS AT WORK TITLE/GRADE START DATE HOURS AT WORK SUPERVISOR'S NAME IF SELF EMPLOYED, TYPE OF BUSINESS 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. NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED. EMPLOYMENT INCOME OTHER INCOME EMPLOYMENT INCOME OTHER INCOME \$ Per Per \$ Per Per GROSS □ NET GROSS SOURCE □ NET SOURCE MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? YES NO ENDING/SEPARATION DATE WHERE ENDING/SEPARATION DATE WHERE PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN STARTING DATE STARTING DATE ENDING DATE FNDING DATE RELATIONSHIP RELATIONSHIP REFERENCE REFERENCE NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU HOME PHONE HOME PHONE

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3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?											
 ARE YOU A CO-MAKER, OF FOR WHOM (Name of Other) 		ON ANY LOAN NOT LISTED ABOVE? TO WH	OM (Name of Cred	ditor):						┚╚	
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STATE LAW NOTICES		S ONLY: The Ohio laws ation require that all creditors		Credit Union is has actual kno							
make credit equally available to all creditworthy customers, and that credit or the account is opened. (reporting agencies maintain separate credit histories on each individual account or loan with your significant control or the account or loan with your significant credit account or loan with your significant credit account or loan with your significant credit account is opened.											
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WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree				X							
under Section 766.70 v	will adversely affect t	SIGNATURE F	IATURE FOR WISCONSIN RESIDENTS ONLY DATE								
			ATURES								
		stated in this application is nat the above information is a		ire applying fo vill constitute							
complete listing of wha	terms of t	terms of the credit card agreement and disclosures. You grant us a security interest in all individual and joint share and/or deposit accounts									
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PAGE 2 KWVA20 (AXX12B)-e