



Community Financial Services Federal Credit Union

Application for Loans & Services

APPLICANT				
Amount Requested: _____		Purpose / Collateral _____		
Term Requested: _____	Payment Protection	<input type="checkbox"/>	Single Credit Disability	
		<input type="checkbox"/>	Joint Credit Disability	
<u>Name</u>	<u>Member Account #</u>	<u>Social Security #</u>	<u>Date of Birth</u>	
<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Years at Current Address</u>
<u>Prior Address (If less than 2 years)</u>				
<u>Home Phone</u>	<u>Work Phone</u>	<u>Housing Status</u>		<u>Monthly Mortgage / Rent</u>
()	()	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	\$
<u>Employer - Name</u>	<u>Employer - Address</u>	<u>Years at job</u>	<u>Gross Annual Income</u>	
			\$	
<u>Any Other Income (amount & source)</u>		Alimony, child support, separate maintenance income need not be revealed if you do not choose to have it considered as a basis for repayment.		
\$				
CO-APPLICANT				
<u>Name</u>	<u>Member Account #</u>	<u>Social Security #</u>	<u>Date of Birth</u>	
<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Years at Current Address</u>
<u>Employer - Name</u>	<u>Employer - Address</u>	<u>Years at job</u>	<u>Gross Annual Income</u>	
			\$	
<u>Home Phone</u>	<u>Work Phone</u>	<u>Any Other Income (amount & source)</u>		
()	()	\$		
Applicant Reference: Name of Nearest relative _____				
Address of nearest relative:		Relationship	Phone	
Other Reference: Name _____				
Address:		Relationship	Phone	
SIGNATURES - You promise that everything you have stated in this application is correct to the best of your knowledge. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, renewal, or extension of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make it's decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal or state chartered credit unions insured by NCUA.				
x		x		
Signature of Applicant	Date	Signature of Spouse / Co-Applicant	Date	
For Credit Union Use Only				
Date:	Approved:	Limit: \$		
	Denied:			
Signatures:		Signatures:		