PORTER FEDERAL CREDIT UNION

850 E Harvard Ave Ste G-45 Denver, CO 80210 Phone: (303) 778-5702



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APPLY	Sign on back page										
	Return completed application to credit union										
	Attach most recent paystub or tax return if self employed										
	 An incomplete or unsigned application may delay processing 										
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. Check below to indicate the type of account(s) and type of credit for which you are applying. Married Applicants may apply for a separate account.											
Market Street Street Street	R° Account/Loan: □	A CONTRACTOR OF THE PARTY OF TH		and the same of th	AND DESCRIPTION OF THE PARTY OF						
(Including A	TM/Debit Card Acces	s to the Account	if Available)	Ψ							
Repaymen	t: 🗌 Payroll Deducti	ion 🗌 Cash	☐ Military Allotr	nent 🗌 Auto	matic Payment						
							CONTRACTOR OF THE PROPERTY OF				
Applicant		one some Server			Co-Applicant	Spouse	Spouse Guarantor MOTHER'S MAIDEN NAME				
NAME (Last - First -	Initial)	MOTHER'S	MAIDEN NAME	NAME (Last - First - I	nitiai)	MOTHERS	MAIDEN NAME				
ACCOUNT NUMBER SOCIAL SECURITY NUMBER			NUMBER	ACCOUNT NUMBER		SOCIAL SECURITY	SOCIAL SECURITY NUMBER				
DRIVER'S LICENSE NUMBER / STATE LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)			DRIVER'S LICENSE	NUMBER / STATE		LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (Exclude Self)					
BIRTH DATE	HOME PHONE	BUSINESS	PHONE/ EXT.	BIRTH DATE	HOME PHONE	BUSINESS	BUSINESS PHONE/ EXT.				
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			ENDING DATE				ENDING DATE				

Applicant Reference NAME AND ADDRESS		REL	ATIONSHIP	Other Reference		š.				:	RELATIO	NSHIP	
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(Include Tax and Ins.) 2nd MORTGAGE							\$		\$				
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SAVINGS	ļ					\$		- 1	YES		NO		7.9
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OTHER (Describe)						\$			YES		NO		<u> </u>
Other Informati About You		IF YOU ANSWER "YES"		THER THAN #1, E	XPLAIN ON AN	ATTACHED S	SHEET		-	APPLICA YES N		OTHE	R NO
DO YOU CURRENTLY PLAN CONFIRMED L PARTY IN A LAWSUIT IS YOUR INCOME LIKE	Y HAVE A UNDER O T? KELY TO	PERMANENT RESIDENT ANY OUTSTANDING JUDG CHAPTER 13, HAD PROP DECLINE IN THE NEXT TO	BMENTS OR HAVE YOU ERTY FORECLOSED U	JPON OR REPOS	OR BANKRUPTC' SSESSED IN THE	Y, HAD A DE E LAST 7 YE.	BT ADJUSTM ARS, OR BEE	ENT EN A	-		_		
4. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? FOR WHOM (Name of Others Obligated on Loan): TO WHOM (Name of Creditor):													
State Law Notices OHIO RESIDENTS ONLY: The Ohio laws against copy of the agreement, statement or decree, or has actual knowledge of discrimination require that all creditors make credit before the credit is granted or the account is opened. (2) Please sign if y equally available to all creditworthy customers, and that applying for this account or loan with your spouse. The credit being applying the incurred in the interest of the marriage or family of the undergraphs of the interest of the marriage or family of the undergraphs.							ou are <mark>not</mark> lied for, if						
request. The Ohio Civil Rights Commission administers compliance with this law.													
WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a													
		San Carlo de Carlo de A		Signa	atures								
You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. 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													
APPLICANT'S SIGNATUI	DE		(SEAL)	DATE	OTHER SIGNA	TIOP		THE WAS STONY STREET			(SE	EAL)	ATE
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			(- 2	or Credit U	nion Hee O	ialv.							
DATE	APPROVE	D	APPROVED SIGNATUR	A Printed States and S	LINE OF CREDIT	ULLY OTH	HER		OTHER		A Section	DEBT RATIO)/SCORF
1 1		Adverse Action Notice Sent)	LIMITS:									BEFORE	AFTER
LOAN OFFICER COMMEN			\$		\$	\$							

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DATE

SIGNATURES: