Mail to: 3236 Lockport Road, Niagara Falls, NY 14305 OR Fax to: (716) 284-0923 Please provide: Proof of Income for each applicant.

REDIFORM NIAGARA FALLS, NEW YORK FEDERAL CREDIT UNION

APPLICATION FOR LOAN (unsecured/secured closed end)

3236 Lockport Road • Niagara Falls, NY 14305 • Phone 716-284-2430 1-800-552-8673

,					
The Patriot Act requires us to have photo I.D. with each new account. Please provide a copy of your Drivers License.		F	OR OFFICE	USE ONLY	
Information regarding: Applicant Additional party		5.7			
Name		Date			
I/We hereby apply for a loan as follows: (**to be completed by applicant)		Accoun	t #	1,4617	
Total New Loan\$		l loan#			
Old Loan Balance(#) \$					
Amount of money requested \$	**				
be repaid in weekly payments of { (number of payments) OR (amount of payment)		Purpose Code			
Including/plus interest starting onPurpose of loan**				-	
We offer Credit Life Insurance at a reasonable cost. And Credit Disability Insurance to insure your loan in the event of sickness or accident at a reasonable cost.	_	redit: (Do NOT complete marital status for INDIVIDUAL credit in non-community property state.)			
STATEMENT OF INTENT		-	nature only	(On almost)	
☐ Credit Life		dorser, guarantor of surety (Co-signer)			
Credit Disability Insurance (Check if coverage is desired)	(N	(Name) (Have this person complete a separate loan application)			
The credit union will disclose the cost of this voluntary insurance to you. A separate insurance election which disclosed the terms and conditions must be signed for coverage to become effective.	☐ Joint Credit - Joint Application or Co-maker (Person who will be equally liable for repayment) (Name)				
Secured Credit - Collateral Shares in Account Nos\$	Re	(Have this person complete a separate loan application) Relationship to applicant if any			
\$\$	MARITAL STATUS: Complete marital status if this loan is for:				
		secured credit, or			
Year Cost/Value \$ VIN #		e in or rely on property located in a Community State. (AZ, CA, ID, LA, NM, NV, TX, WA)			
Other	U	nmarried	Married	Separated	
Owner's Names					
Full Name Birth Date	e	Socia	al Security No.		
Street Address				ears there	
City	State_		Zip Cod	de	
Home Phone () Business Phone () Cell (_			•		
Date Employed Position or Title		Supervisor_	* 1		
Employer's Address			Zin Cod	40	
City				.te	
Dependents (exclude self)					
Address					
*Alimony, child support or separate maintenance income need not be revealed	d if you do not wish	to have it co	onsidered as a ba	asis for repaying this loan.	
Salary (Gross Net) \$ Per					
*Other Income Per Source Is any income listed likely to be reduced before this loan is paid off: No	Yes				
If yes, explain					
(IP-2000)					

If present residence less than 2 years, complete next 2 lines Years there____ Previous Street Address_____ State Zip Code_ City_ If employed by present employer less than 3 years, complete next 2 lines __ Years there__ Previous Employer_ Previous Employer's Address_ **OUTSTANDING DEBTS** (List Everything) **PRESENT** MONTHLY Past Due Creditor (address and account #) DATE LOAN ORIG. DEBT **BALANCE PAYMENT** Yes/No Rent Mortgage Auto Ioan Credit Union Credit Card Credit Card Alimony, etc. Other Other Attach another sheet if necessary TOTALS Are there any other persons obligated on any of the above loans? Yes No (Which ones and who?) Are you a co-maker, co-signer or guarantor on any loan? Yes \(\square\) No For whom?_ To whom?_ Have you been declared bankrupt in the last 14 years? Yes No Everything that I have stated in this application is correct to the best of my knowledge. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. Date Signature of Member___ LOAN OFFICER ACTION Loan officer: ☐ I approve this loan as submitted. Loan rejected. Reason Loan referred to BOD. Date LO signature_ BOD Action: Date_ We approve the loan as submitted. We reject the loan as submitted The following counter offer will be made to the applicant and it accepted, we approve the loan. Describe_____ Specific reason(s) for rejection_ Outside information considered No Yes (describe_____ Date Signed Date_____ Signed______ Date_____ Date_____ Date______ Date______ Date______ _____ Signed_____ Date__ Date ECOA notice and Reason for Rejection sent or delivered on______ Signed