

LOAN APPLICATION

Date: _____ Name: _____ Account #: _____

A P P L I C A N T	You may apply for individual or joint credit, but check only one of the following boxes.	
	<input type="checkbox"/>	Individual Credit – unmarried applicant. Complete only the left hand columns on both sides of this form and other sections as they apply.
	<input type="checkbox"/>	Individual Credit – married applicant. If both you and your spouse are residents of Wisconsin, complete both the left and right hand columns. If either you or your spouse are not Wisconsin residents, complete only the left hand column.
	<input type="checkbox"/>	Joint Credit – with your spouse. Complete the left and right hand columns on both sides of this form and other sections as they apply, and sign the following:
	<input type="checkbox"/> We intend to apply for joint credit: X _____ X _____ Joint Credit – with another applicant or cosigner who is not your spouse. Each of you must complete a separate application. If both you and your spouse are Wisconsin residents include information about your spouse in the right hand column, and sign the following:	
	<input checked="" type="checkbox"/> I intend to apply for joint credit with: X _____ X _____ <div style="text-align: right;">Applicant</div>	

(S) 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:	
	<input checked="" type="checkbox"/>	A direct loan of _____ no. of payments _____ amount of payments _____ Purpose (required) _____ * <input type="checkbox"/> A credit line of _____ <small>*If checked, see attached addendum which is incorporated here by reference</small>
	CREDIT INSURANCE INFORMATION: Credit life or credit disability insurance is not required to obtain credit. If you wish to be considered for credit insurance on the loan for which you are applying, please complete the information below.	
	I	<input type="checkbox"/> Do <input type="checkbox"/> Do not want credit disability insurance for myself <input type="checkbox"/> Do <input type="checkbox"/> Do not want joint credit disability insurance <input type="checkbox"/> Do <input type="checkbox"/> Do not want credit life insurance for myself <input type="checkbox"/> Do <input type="checkbox"/> Do not want joint credit life insurance
We	<input type="checkbox"/> Do <input type="checkbox"/> Do not want credit disability insurance for myself <input type="checkbox"/> Do <input type="checkbox"/> Do not want joint credit disability insurance <input type="checkbox"/> Do <input type="checkbox"/> Do not want credit life insurance for myself <input type="checkbox"/> Do <input type="checkbox"/> Do not want joint credit life insurance	
NOTE: THIS IS NOT A BINDING CONTRACT FOR CREDIT INSURANCE.		
Collateral Offered: _____		Titled in name(s) of: _____
Address: _____		Insured by: _____

APPLICANT	SPOUSE
	IF ANY INFORMATION IDENTICAL TO APPLICANT WRITE "SAME" Complete this section only if you and your spouse are Wisconsin Residents

P E R S O N A L	Complete Only if you are a Wisconsin resident or if you are applying for secured credit. <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (Single/Divorced/Widowed) <input type="checkbox"/> Legally Separated		Last	First	Middle
	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.	Social Security No.	Driver's license no.	Social Security No.	
	Relationship to joint applicant (if any)	Your telephone	Relationship to joint applicant (if any)	Spouse's telephone	
			<input type="checkbox"/> joint applicant <input type="checkbox"/> not a joint applicant		

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		Supervisor	
	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 <input type="checkbox"/> net <input type="checkbox"/> gross per	Ages of Dependents	Present income from employment <input type="checkbox"/> net <input type="checkbox"/> gross per	Ages of Dependents
	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: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> 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: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> 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	Source	Other income	Source
	Is any income listed in this section likely to be reduced in the next 2 years or before the credit request is repaid? <input type="checkbox"/> Yes (explain in detail on a separate sheet) <input type="checkbox"/> No		Is any income listed in this section likely to be reduced in the next 2 years or before the credit request is repaid? <input type="checkbox"/> Yes (explain in detail on a separate sheet) <input type="checkbox"/> No	



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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

D E B T S	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.									
	Y/N	Creditor	Acct #	Balance	Mo. Pmt	Y/N	Creditor	Acct #	Balance	Mo. Pmt
	Nekoosa 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		

A S S E T S	Type of Asset	Value	Outstanding Loan	Type of Asset	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)		

I/we certify that this information 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.

X _____ X _____
 Applicant's Signature Date Spouse Signature (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).	
X	Date
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		
Credit Score	TRC	Debt Ratio
_____	_____	_____

LOAN OFFICER		BOARD MEMBERS	
Total Credit Approved:		Board member signatures	Date
Conditions for approval, or comments		1	
Loan officer signature	Date	2	
Notice to spouse required?	Date Sent: By (initials)	3	
<input type="checkbox"/> Yes <input type="checkbox"/> No		4	

MAIL OR DELIVER TO:
 NEKOOSA CREDIT UNION
 115 PROSPECT AVENUE
 NEKOOSA, WI 54457