

CREDIT APPLICATION



PO Box 1623
Findlay, OH 45839-1623
Phone (419) 424-0163
Fax (419) 424-0124

Applicants should complete this form as "Borrower" or "Co-Borrower," as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when the income or assets of a person other than the Borrower (including the Borrower's spouse) will be used as a basis for loan qualifications or the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of loan.

Amount Requested \$	TYPE OF CREDIT APPLIED FOR:	<input type="checkbox"/> Motorcycle	Purpose Of Loan (Must Complete)
	<input type="checkbox"/> Automobile <input type="checkbox"/> New <input type="checkbox"/> Used	<input type="checkbox"/> Boat, RV, Camper	
	<input type="checkbox"/> Signature	<input type="checkbox"/> Quickloan	
	<input type="checkbox"/> Home Improvement	<input type="checkbox"/> Lifeline	
COMPLETE THE REVERSE SIDE IF YOU ARE APPLYING FOR A CAR/TRUCK LOAN			

METHOD OF PAYMENT <input type="checkbox"/> Coupons <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Automatic Deduction (<input type="checkbox"/> HFCU <input type="checkbox"/> Another Institution)	ACCT #
LENGTH OF REPAYMENT (Months) <input type="checkbox"/> 12 <input type="checkbox"/> 18 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 <input type="checkbox"/> Other (Specify) _____	

Type of insurance desired (Life, Disability) <input type="checkbox"/> Single Life <input type="checkbox"/> Joint Life <input type="checkbox"/> Disability <input type="checkbox"/> Joint Disability <input type="checkbox"/> None	If you are applying for joint credit, secured credit or if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA) please complete the following: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried
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PERSONAL INFORMATION

It shall be an unlawful discriminatory practice for any creditor to do the following: Fail or refuse to print on or firmly attach to each application for credit, in a type size no smaller than that used throughout most of the application form, the following notice: "The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law." This notice is not required in applications that have a multi-state distribution if the notice is mailed to the applicant with the notice of acceptance or rejection of the application.

LAST NAME	FIRST NAME	MI	NAME (CO-APPLICANT - CO-SIGNER)		
PRESENT ADDRESS		COUNTY	PRESENT ADDRESS		COUNTY
CITY, STATE, ZIP		HOW LONG	CITY, STATE, ZIP		HOW LONG
SOCIAL SECURITY NO.	DATE OF BIRTH	HOME PHONE NUMBER	SOCIAL SECURITY NO.	DATE OF BIRTH	HOME PHONE NUMBER
E-MAIL ADDRESS		CELL PHONE NUMBER	E-MAIL ADDRESS		CELL PHONE NUMBER
PRESENT EMPLOYER		WORK PHONE & EXT	PRESENT EMPLOYER		WORK PHONE & EXT
EMPLOYER'S ADDRESS		DATE EMPLOYED	EMPLOYER'S ADDRESS		DATE EMPLOYED
INCOME \$ PER <input type="checkbox"/> gross <input type="checkbox"/> net	OCCUPATION		INCOME \$ PER <input type="checkbox"/> gross <input type="checkbox"/> net	OCCUPATION	
OTHER INCOME <input type="checkbox"/> gross <input type="checkbox"/> net	SOURCE OF OTHER INCOME		OTHER INCOME <input type="checkbox"/> gross <input type="checkbox"/> net	SOURCE OF OTHER INCOME	
PREVIOUS EMPLOYER	OCCUPATION	HOW LONG	PREVIOUS EMPLOYER	OCCUPATION	HOW LONG

NOTE: SELF-EMPLOYED, RETIRED, OR RECEIVING OTHER INCOME, ATTACH TWO YEARS SIGNED TAX RETURNS - ATTACH MOST RECENT PAY STUB

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.
Alimony, child support, separate maintenance received under: court order written agreement oral understanding

CREDIT INFORMATION

NAME OF CREDITOR - HOME MORTGAGE OR LANDLORD <input type="checkbox"/> RENTING <input type="checkbox"/> BUYING	PRESENT BALANCE	MONTHLY PAYMENT	NAME OF CREDITOR - HOME MORTGAGE OR LANDLORD <input type="checkbox"/> RENTING <input type="checkbox"/> BUYING	PRESENT BALANCE	MONTHLY PAYMENT
AUTO PMT	PRESENT BALANCE	MONTHLY PAYMENT	AUTO PMT	PRESENT BALANCE	MONTHLY PAYMENT

REFERENCES

NAME OF RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	NAME OF RELATIVE NOT LIVING WITH YOU	RELATIONSHIP
ADDRESS	PHONE NUMBER	ADDRESS	PHONE NUMBER
ARE ANY OF YOUR DEBTS PAST DUE? <input type="checkbox"/> Yes <input type="checkbox"/> No	HAVE YOU EVER HAD YOUR AUTO, FURNITURE, OR PROPERTY REPOSSESSED? <input type="checkbox"/> Yes <input type="checkbox"/> No	HAVE YOU EVER DECLARED BANKRUPTCY? <input type="checkbox"/> Yes <input type="checkbox"/> No	ARE YOU CURRENTLY A CO-SIGNER ON A LOAN? <input type="checkbox"/> Yes <input type="checkbox"/> No

NOTICE TO CO-SIGNER

NOTICE TO COSIGNER: You are being asked to guarantee this debt. Think carefully before you do. If the borrower doesn't pay the debt, you will have to. Be sure you can afford to pay if you have to, and that you want to accept this responsibility. You may have to pay up to the full amount of the debt if the borrower does not pay. You may also have to pay late fees or collection costs, which increase this amount. The Credit Union can collect this debt from you without first trying to collect from the borrower. The Credit Union can use the same collection methods against you that can be used against the borrower, such as suing you, garnishing your wages, etc. If this debt is ever in default, that fact may become part of your credit record. This notice is not the contract that makes you liable for the debt.

APPLICANT'S SIGNATURE - PLEASE READ BEFORE SIGNING

All the information in this application is true. I understand that section 1014 Title 18 U.S. Code makes it a federal crime to knowingly make a false statement on this application. You have my permission to check it. You may retain this application even if not approved. I understand that you may receive information from others about my credit and you may answer questions and requests from others seeking credit or experience information about me or my accounts with you. If this application is approved, I agree to honor the provisions of the agreements covering my loan or account. (If this application is for two of us, this statement applies to both of us.)

The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

SIGNATURE OF APPLICANT	DATE	SIGNATURE OF CO-APPLICANT (CO-SIGNER)	DATE
X		X	

COMPLETE FOR SECURED LOAN

DESCRIPTION

YEAR _____ MAKE _____ MODEL _____

SERIAL NUMBER _____

PURCHASED THROUGH: ___ DEALER (_____) ___ PRIVATE OWNER

ODOMETER READING _____

ENGINE
___ 4 cylinder
___ 6 cylinder
___ 8 cylinder

BODY TYPE
___ 2 door coupe ___ hatchback
___ 4 door sedan ___ wagon
___ convertible ___ SUV

PICK-UP
___ 6 ½ foot bed
___ 8-foot bed
___ extended cab

ACCESSORIES

___ Power locks	___ Cruise	___ Aluminum Alloy wheels
___ Power windows	___ Tilt Wheel	___ Rear air conditioning
___ Power seats	___ Leather seats	___ Theft recovery system
___ Power sunroof	___ All-wheel drive	___ Running boards
___ CD player	___ Tow package	___ Other _____

CREDIT UNION USE ONLY

APPROVED _____

\$ _____

REJECTED _____

Reason(s) for rejection:

- | | |
|---|--|
| <input type="checkbox"/> slow or past due in trade or loan payments | <input type="checkbox"/> excessive obligations in relation to income |
| <input type="checkbox"/> limited credit history established | <input type="checkbox"/> unsecured credit exceeds 30% of annual gross income |
| <input type="checkbox"/> insufficient positive credit history | <input type="checkbox"/> vehicle loans exceed 75% of annual gross income |
| <input type="checkbox"/> no credit file | <input type="checkbox"/> insufficient length of employment |
| <input type="checkbox"/> poor credit history with HFCU | <input type="checkbox"/> insufficient length of time at residence |
| <input type="checkbox"/> collection action or judgment | <input type="checkbox"/> limited credit established since bankruptcy |
| <input type="checkbox"/> foreclosure or repossession | <input type="checkbox"/> delinquent credit history since bankruptcy |
| <input type="checkbox"/> value or type of collateral not sufficient | <input type="checkbox"/> other _____ |

LOAN OFFICER SIGNATURE _____ DATE _____

LOAN OFFICER SIGNATURE _____ DATE _____