

## LOAN APPLICATION

ACCOUNT NUMBER - APPLICANT ACCOUNT NUMBER - CO-APPLICANT DATE 1051A Detroit Avenue, Concord, CA 94518 (800) 375-6077 • Fax: (925) 771-5601 Applicant Information PRINT OR TYPE ALL INFORMATION **Spouse/Co-Applicant Information**  Complete Spouse/Co-Applicant Information only if:
 a. This is for joint credit with Your Spouse or other Co-Applicant; 1. If You live in a community property state, are You: Separated ☐ Unmarried (Includes Single, Divorced and Widowed) Your Spouse will use Your Account; You are relying on Your Spouse's income as a source of repayment for the credit requested; or 2. Married applicants can apply for individual credit. Indicate if You would like: You live in a community property state: Arizona, California, Idaho, Louisiana, Nevada, ☐ Individual Credit ☐ Joint Credit with Your Spouse/Co-Applicant New Mexico, Texas, Washington, Wisconsin (or Puerto Rico). 6. Definitions: 3. Method of Payment: Payroll Deduction Automatic Share Transfer Cash Payment Whenever used in this application, the words "You" and "Your" refer to the Applicant(s) or Spouse/Co-Applicant and the words "We," "Us," and "Our" refer to the Lender. **4. Frequency of Payment:** ☐ Weekly ☐ Bi-Weekly ☐ Semi-Monthly ☐ Monthly **Credit Applied For:** Amount Requested \$\_\_ Purpose \_ Collateral Offered\_ SPOUSE/CO-APPLICANT APPLICANT OR CO-SIGNER LAST NAME LAST NAME SOCIAL SECURITY NUMBER BIRTHDATE SOCIAL SECURITY NUMBER BIRTHDATE CURRENT STREET ADDRESS YEARS THERE CURRENT STREET ADDRESS YEARS THERE CITY STATE STATE EMAIL ADDRESS EMAIL ADDRESS FORMER ADDRESS (COMPLETE IF CURRENT ADDRESS IS LESS THAN 3 YEARS) YEARS THERE FORMER ADDRESS (COMPLETE IF CURRENT ADDRESS IS LESS THAN 3 YEARS) YEARS THERE DO YOU: DO YOU: HOME TELEPHONE NO. OF DEP. AGES OF DEPENDENTS HOME TELEPHONE NO. OF DEP. AGES OF DEPENDENTS OWN RENT PAY BOARD OWN RENT PAY BOARD NAME. ADDRESS AND TELEPHONE OF NEAREST REFERENCE NOT LIVING WITH YOU NAME. ADDRESS AND TELEPHONE OF NEAREST REFERENCE NOT LIVING WITH YOU **EMPLOYMENT AND INCOME** If self-employed, attach financial statement or income tax returns. CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE) EMPLOYMENT DATE CURRENT EMPLOYER (INCLUDE EMPLOYEE I.D. IF APPLICABLE) EMPLOYMENT DATE ADDRESS/CITY/STATE/ZIP ADDRESS/CITY/STATE/ZIP WORK TELEPHONE POSITION MO. GROSS SALARY WORK TELEPHONE MO. GROSS SALARY FORMER EMPLOYER (IF LESS THAN 2 YRS) POSITION YEARS THERE FORMER EMPLOYER (IF LESS THAN 2 YRS) POSITION YEARS THERE OTHER INCOME Alimony, child support, or separate maintenance income need not be revealed if You do not choose to have it considered. (Proof Required) TYPE OF OTHER INCOME MONTHLY AMOUNT TYPE OF OTHER INCOME MONTHLY AMOUNT NAME AND ADDRESS OF PAYER NAME AND ADDRESS OF PAYER MONTHLY AMOUNT TYPE OF OTHER INCOME TYPE OF OTHER INCOME MONTHLY AMOUNT NAME AND ADDRESS OF PAYER NAME AND ADDRESS OF PAYER ASSETS AND DEPOSITS Attach a separate sheet if necessary. ACCOUNT NUMBER/TYPE BALANCE/VALUE DESCRIPTION ACCOUNT NUMBER/TYPE BALANCE/VALUE DESCRIPTION

CREDIT INFORMATION Please list all open accounts w	ith or w	ithout	a bala	nce. A	ıttach	separate sheet if ne	cessary.	D=Debts to be	C=Spouse paid off if loan				
CHECK	LENDER (OR OTHER) NAME & ADDRESS LIST ALL OBLIGATIONS, INCLUDING CREDIT UNION LOANS							ORIGINAL AMOUNT	BALANCE		MON' PAYN	THLY MENT	
									-				
lease answer the following questions. a yes answer is given, explain on attached sheet.		<b>A</b> NO	YES	NO		TOTALS							
1. Have You filed a petition for bankruptcy in the last 7 years?						Please Check	c: A=Applicant/Co-	Signer C=Co-Appli	icant	YES	A NO	YES	
2. Have You ever had any auto, furniture or property repossessed?	e You ever had any auto, furniture or property repossessed?					6. Have You any obligations not listed?							
Are You a co-maker or co-signer on any loan?				7. Do You have any past due bills?									
For Whom Amount \$			8. Is			s any income You ha	ave listed likely to	reduce in the next t	wo years?			<u> </u>	
Have You ever had credit in any other name?  What name					9. Indicate status:  Applicant U.S. Citizen Permanent U.S. Resident Other								
5. Have You any suits pending, judgments filed, alimony or support awards against You?	ds against You?							anent U.S. Reside					
OPTIONAL CREDIT INSURANCE An appropriate								edit is approved	<u> </u>				
						THE BOXES BEL Insurance coveraç							
						it Insurance coveraç	-						
SIGNATURES													
You warrant the truth of the above information and You realize th employees and agents to investigate and verify any information praccept Your facsimile signatures on this application and agree that may be associated with permitting Us to accept Your facsimile	rovideo at You	to U	s by Y	ou. If	this is	s a joint application	, You agree that	such liability is join	nt and several	I. You	autho	orize L	Js to
You hereby acknowledge Your intent to apply for joint credit	Applica	ant's I	nitials		Cc	o-Applicant's Initials	3						
X Signature of Applicant or Co-Signer Date					X Si	ignature of Spouse/C	Co-Applicant		Date				
LOAN OFFICER								ROVING SIG	<b>SNATUR</b> I	ES			
LOAN APPROVED YES NO COUNTER OFFER WILL BE MADE. IF ACCEPTED, LOAN APPROVED					П социт	LOAN APPROVED YES ☐ NO ☐ ☐ COUNTER OFFER WILL BE MADE. IF ACCEPTED, LOAN APPROVED							
DESCRIBE COUNTER OFFER													
SPECIFIC REASON(S) FOR DENIAL/APPROVAL													
	DATE				С	REDIT LIMIT \$		ADDITIONAL INI	FORMATION				
APPROVING MANAGER OR OTHER	DATE				+								
☐ ECOA NOTICE AND REASON FOR REJECTION OR UNACCEPT	ED CC	OUNTE	R-OF	FER S	SENT	OR DELIVERED ON	N	(DATE) BY	(				