

APPLICATION FOR CREDIT

Baton Rouge City Parish

Employees' Federal Credit Union

Post Office Box 3521

Baton Rouge, Louisiana 70821

Phone (225) 389-3059

Fax (225) 389-5323

Account Number: _____

Name: _____ Date of Birth: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____ Work Phone: _____

Pager #: _____ Cell Phone: _____ Other #: _____

Driver License #: _____ Social Security #: _____

*** ONLY FILL OUT JOINT INFORMATION IF USING A JOINT APPLICANT***

*** IF USING A JOINT APPLICANT, JOINT MUST SIGN THE APPLICATION OR IT CAN NOT BE PROCESSED***

Joint Name: _____ Date of Birth: _____

Drivers License #: _____ Social Security #: _____

Marital Status (Circle One): Unmarried, Married, Separated Number of Dependents (not counting yourself): _____

I HEREBY APPLY FOR A LOAN OF \$ _____ FOR A PERIOD OF _____ MONTHS/YEARS

LOAN IS FOR THE FOLLOWING PURPOSE: _____

(Personal is not acceptable)

COLLATERAL OFFERED: _____

(If you wish to offer your shares as collateral, please state. Other acceptable collateral are new/used autos, boats, campers, etc. If you are not offering any collateral and wish to consider your application on an unsecured basis, please write "NONE" in the blank above.)

EMPLOYMENT:

Employer's Name/Dept.: _____ How long Employed: _____

Monthly Salary: _____ / _____ Position/Title: _____ Supervisor's Name: _____
(Gross) (Take home)

***OTHER INCOME (if any):**

Source: _____ Amount \$ _____

JOINT INFORMATION (only if using joint):

Joint Employer: _____

How long Employed: _____ Monthly Salary: _____ / _____ Work #: _____
(Gross) (Take home)

*Alimony, child support, or separated maintenance income does not have to be revealed if you do not wish to have it considered as a basis for repaying this loan.

Court Order
 Written Agreement
 Oral Understanding \$ _____

PREVIOUS EMPLOYMENT (IF EMPLOYED BY YOUR PRESENT EMPLOYER FOR LESS THAN 2 (TWO) YEARS, PLEASE COMPLETE THE NEXT TWO LINES):

Previous Employer's Name: _____ How Long There _____

Address: _____

REFERENCE:

Relative Name: _____ Address: _____ Phone: _____

Friend Name: _____ Address: _____ Phone: _____

PERSONAL FINANCIAL INFORMATION (List all Checking and/or Savings Accounts that you have at other institutions):

Where: _____ Type of Account: _____ Balance: _____
(checking, savings, christmas club, certificates, etc.)

Where: _____ Type of Account: _____ Balance: _____

(OVER)

DEBTS (List everything you owe) *Please furnish a separate sheet if the spaces below are not sufficient to list all debts:*

Creditor	Original Date	Original Amount	Present Balance	Monthly Payment	Past Due Yes/No
Rent/House Note					
Auto Loan					
Other Debt					
Other Debt					
Other Debt					
Other Debt					
Other Debt					
Other Debt					
Other Debt					
Other Debt					
Other Debt					

FOR CREDIT UNION USE ONLY: Total Indebtedness \$ _____ Total Monthly \$ _____ %

Are you a cosigner or co-maker on any loans other than your own? Yes No If so, who are you cosigned for? (Name) _____ List and indicate all those debts above.

Have you declared bankrupt in the last 14 years? Yes No If so, when? _____

Do you own an automobile, is so what Year: _____ Make: _____ Model: _____
 Year: _____ Make: _____ Model: _____

I/We promise that everything I/We have stated in this application is true and correct to the best of my knowledge and that the above information is a complete listing of all my debts and obligations. I/We 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 and to verify employment history. If I request, the Credit Union will tell me the name and address of any credit bureau from which it received a credit report on me. I/We understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to Federal Credit Unions Insured by NCUA. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended.

Member Signature: _____ **Date:** _____

Joint Signature: _____ **Date:** _____

DO NOT FILL OUT, CREDIT UNION USE ONLY:

Share Balance: _____ Checking: Yes or No Proceeds: _____
 M/C Limit: _____ Escrow: _____ T, T & L: _____
 Loan Balances: _____ Other Debt: _____
 _____ Amount Financed: _____

LOAN COMMITTEE / LOAN OFFICER ACTION

LOAN OFFICER: Reason / Recommendation: _____
 I approve the loan as submitted _____
 Loan referred to Loan Committee _____

Loan Officer Signature: _____ **Date:** _____

LOAN COMMITTEE: **DATE:** _____
 We approved the loan as submitted
 We reject the loan as submitted
 The following counter offer will be given to the applicant and if accepted we approve the loan.

Describe: _____

ECOA Notice and Reason for Rejection sent or delivered on _____

Signed: _____