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**CONSUMER LOAN APPLICATION**

ACCOUNT NUMBER	DATE
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**APPLICANT INFORMATION. Married Applicants may apply for an individual loan/separate account.**  
**Type of Credit.** Check the type of credit for which you wish to apply.  
 **Individual credit** -- If you are applying for individual credit, complete the Applicant section.  
 **Joint credit** -- If you are applying for joint credit with your spouse or another person, complete the Applicant section and the Spouse/Co-Applicant section.

You must initial here if you intend to apply for Joint Credit: Applicant: **X** Co-Applicant: **X**

**Spouse Information.** You must also complete the Spouse section if any of the following apply: (1) your spouse will use your account; (2) you are relying on your spouse's income as a source of repayment; (3) you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI or Puerto Rico); or (4) you are an Alaska resident and are currently subject to a community property agreement or community property trust.

**TYPE OF CREDIT APPLIED FOR:**  
 Amount Requested: \_\_\_\_\_ Term (months) (closed-end credit only): \_\_\_\_\_ Purpose: \_\_\_\_\_  
 Payment Method:  Cash  Payroll Deduction  Automatic Payment  Military Allotment Payment Frequency:  Monthly  Other \_\_\_\_\_

**Optional Payment Protection** -- If you answer "yes" the Credit Union will disclose the cost of optional payment protection to you. A separate election that discloses the terms and conditions must be signed for protection to become effective. **Are you interested in having this loan protected?**  Yes  No

<input type="checkbox"/> <b>APPLICANT</b> Complete only if: (a) credit will be secured by collateral; or (b) you live in a community property state; or (c) you are an Alaska resident subject to a community property agreement or community property trust: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single, Divorced, Widowed)				<input type="checkbox"/> <b>SPOUSE</b> <input type="checkbox"/> <b>CO-APPLICANT/GUARANTOR</b> Complete only if: (a) credit will be secured by collateral; or (b) you live in a community property state; or (c) you are an Alaska resident subject to a community property agreement or community property trust: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single, Divorced, Widowed)											
APPLICANT NAME				SPOUSE/CO-APPLICANT NAME											
SOCIAL SECURITY NO.		DRIVER'S LICENSE NO. & STATE		BIRTH DATE		SOCIAL SECURITY NO.		DRIVER'S LICENSE NO. & STATE		BIRTH DATE					
HOME PHONE NO.		CELL PHONE		DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT		HOME PHONE NO.		CELL PHONE		DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT					
MOTHER'S MAIDEN NAME			E-MAIL ADDRESS			MOTHER'S MAIDEN NAME			E-MAIL ADDRESS						
CURRENT STREET ADDRESS				APT. NO.		SINCE		CURRENT STREET ADDRESS				APT. NO.		SINCE	
CITY/STATE/ZIP				CITY/STATE/ZIP											
PERSONAL REFERENCE 1 (Name and Address)				RELATIONSHIP				PERSONAL REFERENCE 1 (Name and Address)				RELATIONSHIP			
				PHONE NO.								PHONE NO.			

**EMPLOYMENT & INCOME** If you are self-employed, please provide one year of complete tax returns.

CURRENT EMPLOYER				HIRE DATE		<input type="checkbox"/> PART TIME		CURRENT EMPLOYER				HIRE DATE		<input type="checkbox"/> PART TIME	
						<input type="checkbox"/> FULL TIME								<input type="checkbox"/> FULL TIME	
EMPLOYER ADDRESS								EMPLOYER ADDRESS							
WORK PHONE NO.		POSITION		MONTHLY GROSS INCOME				WORK PHONE NO.		POSITION		MONTHLY GROSS INCOME			
				\$								\$			
FORMER EMPLOYER (if current less than 2 years)				START DATE		END DATE		FORMER EMPLOYER (if current less than 2 years)				START DATE		END DATE	
MILITARY - IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO				MILITARY - IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO											
WHERE:				WHERE:											
ENDING/SEPARATION DATE:				ENDING/SEPARATION DATE:											

**OTHER INCOME** You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit.

SOURCE OF OTHER INCOME		FREQUENCY		MONTHLY INCOME		SOURCE OF OTHER INCOME		FREQUENCY		MONTHLY INCOME	
				\$						\$	

**SIGNATURES -- Are you currently on active military duty?**  Yes  No

You promise that the information stated in this Loan Application is true and correct to the best of your knowledge. You authorize the Credit Union to obtain credit reports when updating its records in connection with any review, increase, extension or renewal of credit, and in connection with any collection activities involving credit extended to you. The Credit Union may also obtain credit reports to update, increase, extend, renew or collection of the credit received by you. False or misleading statements in your application may cause any loan to be in default. You agree that this application shall be the Credit Union's property whether or not this application is approved. You will notify the Credit Union in writing immediately of any changes in your name, address or employment. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information to obtain credit. If you request, you will be provided the name and address of any credit bureau from which we received a credit report. You understand and agree that if your application is approved, that any collateral described in any security agreement, pledge, advance disbursement voucher or similar document that may be executed, now or in the future, in connection with such credit will secure the Credit Union for repayment of funds advanced to you, subject to the terms and conditions of such security agreement, pledge, advance disbursement voucher or similar document. You understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on requests made to Federal Credit Unions or State Chartered Credit Unions insured by the NCUA.

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT:** To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

**OHIO RESIDENTS:** The Ohio laws against discrimination requires that 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.

**WISCONSIN RESIDENTS:** For any provision of any marital property agreement, court decree under WI ST § 766.70, or statement under WI ST § 766.59 to adversely affect the rights of the Credit Union, the Credit Union must be provided with a copy of the Agreement, decree or statement or have actual knowledge of its terms before any credit is approved or account opened. Sign if you are NOT applying for this loan account with your spouse. This credit request, if approved, will be incurred in the interest of the marriage or family of the undersigned.

Wisconsin Resident Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>X</b>	<b>X</b>
Applicant	Spouse/Co-Applicant/Guarantor
Date	Date