

# CONSUMER Credit Application

# HIGH PLAINS FEDERAL CREDIT UNION

If you are applying for individual credit in your own name, are not married, and are not relying on alimony, child support, or separate maintenance payments or on the income or assets of another person as the basis for repayment of the credit requested, complete only Sections A and C. If the requested credit is to be secured, also complete Section D.

In all other situations, complete all Sections except Section D, providing information in B about your Spouse, a Joint Application or User, or the person on whose alimony, support, or maintenance payments or income or assets you are relying. If the requested credit is to be secure, also complete Section D.

If you intend to apply for joint credit, please initial here. Applicant \_\_\_\_\_ Co-Applicant \_\_\_\_\_

**SECTION A: APPLICANT INFORMATION** *In order to better assist you, please fill in the application completely. Thank you for choosing High Plains Federal Credit Union*

Amount Requested: \$ _____		Purpose of the Loan: _____			Payment Date Desired: _____	
Full Name:			Social Security Number		Date of Birth	Home Phones:
Physical Address			Mailing Address (if different)		How long at Current Address Years _____ Months _____	Own <input type="checkbox"/> Rent <input type="checkbox"/> Monthly Payment \$ _____
City	State	Zip Code	Previous Address			How Long? _____ years _____ Months
Employer		If Self Employed, at what? Job Title		How Long? Yrs. _____ Mths _____	Work Phone:	Gross Monthly Income \$ _____
Previous Employer and Address			How Long? Yrs _____ Mths _____		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	* Other Income \$ _____
Have you filed bankruptcy in the past 7 years? <input type="checkbox"/> / <input type="checkbox"/> / Yes <input type="checkbox"/> / <input type="checkbox"/> / No If so, when? _____				Drivers License/ID # _____		State: _____

**SECTION B: INFORMATION REGARDING SPOUSE, JOINT APPLICANT, USER, OR OTHER PARTY**

Full Name:			Social Security Number		Date of Birth	Home Phones:
Physical Address			Mailing Address (if different)		How long at Current Address Years _____ Months _____	Own <input type="checkbox"/> Rent <input type="checkbox"/> Monthly Payment \$ _____
City	State	Zip Code	Previous Address			How Long? _____ years _____ Months
Employer		If Self Employed, at what? Job Title		How Long? Yrs. _____ Mths _____	Work Phone:	Gross Monthly Income \$ _____
Previous Employer and Address			How Long? Yrs _____ Mths _____		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	* Other Income \$ _____
Have you filed bankruptcy in the past 7 years? <input type="checkbox"/> / <input type="checkbox"/> / Yes <input type="checkbox"/> / <input type="checkbox"/> / No If so, when? _____				Drivers License/ID # _____		State: _____

**Relationship to Applicant (if any),**

**\*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 APPLICANT IS SELF-EMPLOYED, PLEASE SUBMIT A CURRENT BALANCE SHEET, INCOME SHEET AND TAX RETURN.\*\*\***

**SECTION C: ASSETS & DEBT INFO** (If Section B has been completed, this Section should be completed giving information about both the applicant and Spouse, Joint Applicant, User, or Other Person. Please mark applicant related info with an "A". If section B was not completed, only give information about the Applicant in this section.)

Assets		Liabilities		
Name of your Bank:		<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loans <input type="checkbox"/> Other	Owed to: ( for Mortgage/rent) <b>Balance:</b> _____ <b>Monthly Payment:</b> \$ _____	
Autos – Make, Model & Year		Value: _____	Auto Loans	
Other Assets:			Other Loans	
Insurance Agent (Homeowners)		Company _____	Address _____	Phone Number _____ Policy Number _____
Insurance Agent (Auto)		Company _____	Address _____	Phone Number _____ Policy Number _____

\*\*\*\*\*Should additional space be needed for listing assets or liabilities, please use the back of this form or attach a separate sheet of paper.\*\*\*\*\*

Name and address of nearest relative not living with Applicant, Spouse, Joint Applicant, User or Other Party			Phone:	Relationship
Name and address of personal reference			Phone	Relationship:
Name and address of personal reference:			Phone:	Relationship:

**SECTION D: SECURED CREDIT** (Complete only if credit is to be secured) Briefly describe the property to be given as security.

Description		Owners of the property
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I CERTIFY THE INFORMATION SET FORTH ABOVE IS IN ALL RESPECTS TRUE, ACCURATE, COMPLETE AND CORRECTLY REFLECTS MY (OUR) FINANCIAL CONDITION ON THE DATE OF THIS APPLICATION AND IS GIVEN FOR THE PURPOSE OF OBTAINING THE LOAN REQUESTED. I HEREBY AUTHORIZE THE CREDIT UNION TO OBTAIN SUCH INFORMATION AS IT MAY REQUIRE CONCERNING THIS APPLICATION AND AGREE THAT SUCH INFORMATION, AS WELL AS THIS APPLICATION, SHALL BECOME THE CREDIT UNION'S PROPERTY WHETHER OR NOT THE LOAN IS GRANTED.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Co-Applicant/Co-Signer \_\_\_\_\_ Date \_\_\_\_\_