

75 Nielson Street



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			8						
		-							
	蓋								
Individual Credit: You must compl 1. you live in or the property pledge 2. your spouse will use the account 3. you are relying on your spouse's complete the Other section to the Joint Credit: Each Applicant must in Guarantor: Complete the Other se	ed as collateral is lot, or income as a basis e extent possible andividually completed.	for repayment. If you about the person on we the appropriate section	r property state (AK, AZ, CA, I are relying on income from alir hose payments you are relying on below. If Co-Borrower is spot	D, LA, NM, NV, TX, mony, child support, g.	or separate maintenance,				
Check below to indicate the type				Applicants may appl	ly for a separate account				
		No. of the Control of	1.17. 74. 10.00		y for a separate account.				
☐ LOANLINER® Account/Loan: (Including ATM/Debit Card Acc			lested \$ Purp	ose/Collateral:	1				
Repayment: Payroll Ded			nent	ant					
nepayment. Payron Dedi	uction _ Casi	I Initially Alloti	nent	5110					
Single Credit	Disability Insurance	☐ Single Credit Life I	check coverage(s) des	ired. The credit union	will disclose the cost of this				
raymone	Disability Hisulatice	☐ Joint Credit Life In:	valuate a la surance te		ance election which discloses				
Protection		John Great Life III			coverage to become effective.				
Applicant			Other: Co-Applica	nt Spouse	Other				
NAME (Last - First - Initial)		(i)	NAME (Last - First - Initial)						
				54					
ACCOUNT NUMBER	SOCIAL SECURITY	NUMBER	ACCOUNT NUMBER	SOCIAL SE	CURITY NUMBER				
	-								
DRIVER'S LICENSE NUMBER / STATE LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)			DRIVER'S LICENSE NUMBER / STATE	OF DEPENDENTS NOT LISTED ANT (Exclude Self)					
BIRTH DATE HOME PHONE CE	LL PHONE B	USINESS PHONE/ EXT.	BIRTH DATE HOME PHONE	CELL PHONE	BUSINESS PHONE/ EXT.				
BIATH DATE HOWE PHONE CE	EL PHONE B	OSINESS PHONE/ EXT.	BIATA DATE HOME PHONE	CELE PHONE	BOSINESS FRONE/ EXT.				
() () ()	E-MAIL ADDRESS	()	()				
E-MAIL ADDITICSS		×	L-WAIE ADDITESS						
PRESENT ADDRESS (Street - City - State - Zip	1		PRESENT ADDRESS (Street - City - S	itate - Zin)					
THESE IN ABBITESS (Street - Sity - State - Zip	7	OWN RENT	THESE IN ASSINESS (SINGLE SIN)	OWN RENT					
***********		ADDRESS	ADDRESS						
PREVIOUS ADDRESS (Street - City - State - Zi	n)		PREVIOUS ADDRESS (Street - City -	State - Zin)					
THE TIESE NEED (CHOCK ON) CHAIC E	Ρ/	OWN RENT	PREVIOUS ADDRESS (Street - City - State - Zip) OWN REN YEARS AT THIS						
		ADDRESS		****************	ADDRESS				
COMPLETE FOR JOINT CREDIT, SECURED O	REDIT OR IF YOU LIVE	IN A COMMUNITY	COMPLETE FOR JOINT CREDIT, SEC	CURED CREDIT OR IF YOU	U LIVE IN A COMMUNITY				
PROPERTY STATE:		200 by 200 200 1778V	PROPERTY STATE:	1510					
	JNMARRIED (Single - Div	vorced - Widowed)	MARRIED SEPARATED	UNMARRIED (Sin	gle - Divorced - Widowed)				
Employment/Income			NAME AND						
ADDRESS OF			ADDRESS OF		**********				
EMPLOYER TITLE/GRADE	START DATE	HOURS AT WORK	EMPLOYER TITLE/GRADE	START DATE	HOURS AT WORK				
			nen vitt still setter						
SUPERVISOR'S NAME	IF SELF EMPLOYED, T	YPE OF BUSINESS	SUPERVISOR'S NAME	IF SELF EMPLO	OYED, TYPE OF BUSINESS				
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPAR. IF YOU DO NOT CHOOSE TO HAVE IT O	ATE MAINTENANCE INCOM CONSIDERED.	ME NEED NOT BE REVEALED	NOTICE: ALIMONY, CHILD SUPPORT, O IF YOU DO NOT CHOOSE TO I	R SEPARATE MAINTENANC HAVE IT CONSIDERED.	E INCOME NEED NOT BE REVEALED				
EMPLOYMENT INCOME	OTHER INCOME	+2	EMPLOYMENT INCOME	OTHER INCO	OME				
\$PER	\$	_ PER	\$PER	\$	PER				
NET GROSS	SOURCE		NET GROSS	SOURCE					
MILITARY: IS DUTY STATION TRANSFER EXIMITERE		YEAR? YES NO NO NOTE	MILITARY: IS DUTY STATION TRANS	FER EXPECTED DURING	NEXT YEAR? YES NO ENDING/SEPARATION DATE				
PREVIOUS EMPLOYER NAME AND ADDRESS THAN FIVE YEARS	S IF EMPLOYED LESS	STARTING DATE	PREVIOUS EMPLOYER NAME AND A THAN FIVE YEARS	ADDRESS IF EMPLOYED I	LESS STARTING DATE				
		ENDING DATE	***************************************		ENDING DATE				

Applicant Reference	9	RELATIONSHIP	Other Ref	THE PERSON NAMED IN					RELATION	NSHIP
NAME AND ADDRESS			NAME AND AD	DRESS						
OF NEAREST RELATIVE NOT LIVING WITH YOU		HOME PHONE	OF NEAREST RELATIVE NOT LIVING WITH Y						HOME PH	IONE
What You Owe	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)			INTEREST			MONTHLY PAYMENT		OWED BY	
RENT FIRST	•	one control of the co							Applicant	Other
MORTGAGE							¢			
Include Tax and Ins.)					\$		\$			
2nd MORTGAGE					\$		\$			
1st AUTO LOAN					\$		\$			
2nd AUTO LOAN		K:			\$		\$			
CHILD-CARE					\$		\$			
CHILD SUPPORT					\$		\$			
CREDIT CARD					\$		\$			
CREDIT CARD					\$		\$			
OTHER					\$		\$			
OTHER					\$		s		ē	
CO. 2.705.50	ICH YOUR CREDIT REFERE	ENCES AND CREDIT HISTORY CAN BE	E CHECKED:	TOTALS	S	101	\$			
				TOTALO	J		J J			-
What You Own	LIST LOCATION OF	PROPERTY OR FINANCIAL INSTITU	TION	MARKE	TVALUE	PLEDGED AS COLLATERAL			TO SECURE THE PROPERTY OF THE	
			VDC11550	2000000000		FOR	ANOTHER	LUAN	Applicant	Other
HOME				\$			YES	NO		
AUTO	1000	5(*):		\$			YES	NO		
SAVINGS				\$			YES	NO		
CHECKING				\$			YES	NO		
OTHER (Describe)	6			\$	No.		YES	NO		
Other Information				1.			APP	LICANT	OTHE	R
About You	IF YOU ANSWER "YES"T	TO ANY QUESTION OTHER THAN #1,	EXPLAIN ON AN	ATTACHED S	HEET		YES	1 10000	(Tearners)	NO
1. ARE YOU A U.S. CITIZEN C	AR PERMANENT RESIDENT	ALIEN2								
request. The Ohio Civil Rig WISCONSIN RESIDENTS (discrimination requir equally available to all maintain separate credit hts Commission adminis DNLY: (1) No provision of	ONLY: The Ohio laws agains e that all creditors make cred I creditworthy customers, and the histories on each individual uposters compliance with this law.	dit before the c at applying for on granted, will	redit is gra this accou	nted or the a nt or loan wi	ccount i th your	s opened spouse.	. (2) Pleas The credit	e sign if yo being appl	u are n
		t decree under Section 766.70 w ess the Credit Union is furnished		OR WISCON	SIN RESIDENT	SONIV			DATE	
adversely affect the rights	of the orealt official unit			OH WISCON	OIN TIESIDENT	OONLI			DAIL	
		The second section of the second seco	natures			71+75027+039500		W - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	56	704.4 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
your knowledge and that th there are any important cha the Credit Union to obtain o	ne above information is a ranges you will notify us in credit reports in connection	application is correct to the best of complete listing of what you owe. In writing immediately, You authorized with this application for credit and received. You understand that the	If its decision. ze credit bureau nd deliberately p	If you requ from which		t Union credit i	will tell yo report on	ou the nam you. It is a	ne and addre	ess of ar
X	allers and a second	(SEAL)	X				11-2	(5	SEAL)	
APPLICANT'S SIGNATURE		DATE	OTHER SIGNA	ATURE					D	ATE
/ 2.0/ / 0 0.0/ / 0 / 12		5.112	O THE TOTAL							20.5
		For Credit I	Union Use C	only						
DATE APPRO	OVED	APPROVED SIGNATURE	LINE OF CREDIT	-	HER	0	THER		DEBT RATIO	
DENIE	D (Adverse Action Notice Sent)	LIMITS:	\$	\$		s			BEFORE	AFTER
LOAN OFFICER COMMENTS:	Section Section	Ψ	Ψ	3						
SIGNATURES:										
X			X							

DATE

DATE