

LOAN AMOUNT \$ _____ PURPOSE _____
 LOAN AMOUNT \$ _____ PURPOSE _____
 LOAN AMOUNT \$ _____ PURPOSE _____

TOTAL LOAN \$ _____

- Life
- Disability
- Gap

COLLATERAL _____

OFFICE USE ONLY
 DEBT RATIO _____
 #MONTHS _____
 PAYMENT _____
 INT RATE _____



West Michigan Postal Service
 Federal Credit Union

LOAN APPLICATION

ACCT # _____

- APPROVED DATE _____
- REJECTED (reason) _____

LOAN OFFICER _____

NAME				SOCIAL SECURITY NUMBER	
RESIDENCE ADDRESS		CITY	STATE	ZIP CODE	YRS THERE
BIRTHDATE	TELEPHONE NO.	AGE OF DEPENDENTS	DO NOT COMPLETE IF THIS APP IS FOR INDIVIDUAL UNSECURED CREDIT	<input type="checkbox"/> UNMARRIED	<input type="checkbox"/> MARRIED
LAST PREVIOUS ADDRESS		CITY	STATE	ZIP CODE	YRS THERE
NOW EMPLOYED BY	DATE EMPLOYED	POSITION	GROSS PAY \$	<input type="checkbox"/> WEEKLY	<input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUAL
COMPLETE BUSINESS ADDRESS		TELEPHONE AT WORK		DRIVER'S LICENSE NUMBER	
PREVIOUS EMPLOYER	ADDRESS	POSITION	DATES (MO/YR - MO/YR)		
REFERENCE (RELATIVE NOT LIVING WITH YOU)	ADDRESS	PHONE NUMBER	RELATIONSHIP		
OTHER REFERENCE	ADDRESS	PHONE NUMBER	RELATIONSHIP		

OTHER INCOME

YOU ARE NOT REQUIRED TO DISCLOSE INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE BUT IF YOU WANT IT CONSIDERED IN CONNECTION WITH THIS APPLICATION, COMPLETE THE FOLLOWING: IF YOU ARE RELYING ON THE INCOME OF ANOTHER PERSON AS A BASIS FOR REPAYMENT, COMPLETE THE SHADED AREA BELOW:	CHILD SUPPORT \$	OTHER \$
	ALIMONY \$	SOURCE
	SEPARATE MAINTENANCE \$	

NAME		DRIVER'S LICENSE NUMBER		SOCIAL SECURITY NUMBER		BIRTHDATE
NOW EMPLOYED BY	DATE EMPLOYED	POSITION	GROSS PAY \$	<input type="checkbox"/> WEEKLY	<input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUAL	
COMPLETE BUSINESS ADDRESS				TELEPHONE AT WORK		

MORTGAGE OR RENT INFORMATION

MTG/RENT	INTEREST RATE	BALANCE OWED	MONTHLY PAYMENTS

SIGNATURES

YOU PROMISE THAT EVERYTHING YOU HAVE STATED IN THIS APPLICATION IS CORRECT TO THE BEST OF YOUR KNOWLEDGE AND THAT THE ABOVE INFORMATION IS A COMPLETE LISTING OF WHAT YOU OWE. If there are any important changes you will notify us in writing immediately. You 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. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA.

BY SUBMISSION OF THIS APPLICATION I AM AGREEING TO A **\$10.00 APPLICATION FEE** THAT WILL BE CHARGED TO MY ACCOUNT.

APPLICANTS SIGNATURE	DATE

OTHER SIGNATURE	DATE