Application Date	cation Date)
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Note#:_____

I.B.E.W. LOCAL #56 FEDERAL CREDIT UNION

APPLICATION FOR LOAN

				Account#:
Addross.	First	Middle Initial	Last	Loan Type:
		State: 7in:		Cell: ()
				No. of Dependants
Homeowi				
	Market Value:		Location:	
Renters:	_			
	Landlord Name:		Monthly Rer	nt Payment:
	Address:			Phone: ()
		lowing purposes: (plea		
\$		New Money to: _		
\$	т	Го Payoff Note #	Principal = \$	Interest = \$
				Interest = \$
			DISABILITY INSURANCE, At a co	
I DO,				
		•		
Do,	Do Not desi	ire to purchase CREDIT	LIFE INSURANCE, At a cost of \$	
Do,	Do Not desi	ire to purchase CREDIT		
Do,	Do Not desi	ire to purchase CREDIT	LIFE INSURANCE, At a cost of \$	
lDo, Co-maker	Do Not desi s and/or Security	ire to purchase CREDIT offered:	LIFE INSURANCE, At a cost of \$	
IDo, Co-maker Total amc	Do Not desi s and/or Security ount of loan \$	ire to purchase CREDIT offered:	LIFE INSURANCE, At a cost of \$	
IDo, Co-maker Total amo To be rep	Do Not desi s and/or Security ount of loan \$ aid in #	ire to purchase CREDIT offered: equal () weekly,	LIFE INSURANCE, At a cost of \$	
Total amc To be rep Each inclu	Do Not desi s and/or Security ount of Ioan \$ aid in # uding interest at th	ire to purchase CREDIT offered: equal () weekly, he rate of	LIFE INSURANCE, At a cost of \$	installments of \$
Total amc To be rep Each inclu	Do Not desi s and/or Security ount of Ioan \$ aid in # uding interest at th	ire to purchase CREDIT offered: equal () weekly, he rate of	LIFE INSURANCE, At a cost of \$	installments of \$
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List all vehicles owned by you:

Year	Make	Model	Creditor	Amt Owing	Mthly Pmt

List all other creditors and debts which you are legally responsible for:

Creditors	Amount Owing	Monthly Payment
Mortgage (including/excluding escrow):		
Home Equity:		
Student Loan:		
Medical:		
Credit Cards:		
Other:		
Child Support/ Alimony:		
Total (to be completed by C.U.)		

Additional Information: (Credit References, Bank References, etc.)

I hereby certify that all statements made, including those on the reverse side hereof, are accurate and complete, to the best of my knowledge, and are submitted for the purpose of obtaining credit, I have no other debts. The credit union is authorized to check my credit and employment history and to answer questions about its credit experience with me.

Signature of applicant

Date

The information below, including appropriate signature(s), is to be filled in by either the credit committee or loan officer, depending upon who acts upon this application.

On ______, ____, (I) (We) approved a loan in the amount and on the conditions requested by the above applicant, except as follows (list any changes in amount, terms, or conditions):______

Approved by CREDIT COMMITTEE And/ Or BOARD OF DIRECTORS (when required):

•	members shown as present in the minutes of etcd by credit union personnel:	the meeting at which this application was Share balance:	approved must sign above.) Date acct open:
Loan #	Balance:	Status:	
Loan #	Balance:	Status:	
Loan #	Balance:	Status:	