

St. Helen Federal Credit Union

5000 Burkhardt Rd · Dayton, OH 45431
 Phone: 937-252-7477 · Fax 937-252-7441
sthelenfcu@sbcglobal.net

Loan Application

Account #

Terms Requested

Amount	Payment Date	Type of Loan <input type="checkbox"/> Installment Loan <input type="checkbox"/> Line of Credit
Length of Term	Desired Payment	Purpose

Individual Applicant Information

Name		Birthdate / /	Social Security Number
Address (Street, City, State, Zip)		<input type="checkbox"/> Rent <input type="checkbox"/> Own Home Number	Cell Phone Number
Employer		Position	Years Employed
Business Phone	Wages, Salary, Commissions Gross: \$ /month	Pay Period <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly	
Previous Employer (if length of current job is less than one year)		Position	Years Employed
Name and Address of Applicant's Nearest Relative			Relationship

Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered. Alimony, child support, separate maintenance received pursuant to: **Court Order** **Written Agreement** **Oral Understanding**

Source of Additional Income	Amount per Month \$
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Includes single, divorced and/or widowed)	
Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, What Year	Do you have any judgements, garnishes or legal proceedings against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain

Joint Applicant Information

Provide the information in this section for a joint applicant or another party that will use or contribute assets or income toward repayment on the loan.

Name		Birthdate / /	Social Security Number
Address (Street, City, State, Zip)		<input type="checkbox"/> Rent <input type="checkbox"/> Own Home Number	Cell Phone Number
Employer		Position	Years Employed
Business Phone	Wages, Salary, Commissions Gross: \$ /month	Pay Period <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly	
Previous Employer (if length of current job is less than one year)		Position	Years Employed
Name and Address of Applicant's Nearest Relative			Relationship

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Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, What Year	Do you have any judgements, garnishes or legal proceedings against you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain

Outstanding Debts

Include mortgage or rent, automobile loans, all charge accounts, installment contracts, credit card and other obligations.

Creditor	Original Amount	Present Balance	Monthly Payments
Mortgage/Rent			
Auto Loans			
Credit Cards			
Other			
Total Debts			

NOTICE:

I hereby certify everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer any questions about your credit experience with me. I hereby authorize the Credit Union to whom this application is made, or any Credit Bureau or other investigative agency employed by such Credit Union, to investigate the references herein listed or statements or other data obtained from me or from any other source whatsoever pertaining to my credit and financial responsibility. "The Ohio laws against discrimination require that all creditors make equally available to all credit worthy 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.

Applicant Signature _____ Date _____

Joint Applicant Signature _____ Date _____

Credit Union Use Only

This application was taken: Face-to Face Mail Telephone Email Fax

Date Application Received	Received By	Amount Requested \$
Date Approved	Approved/Declined By Credit Committee Date	Amount Approved \$
Date Declined	Approved/Declined By Credit Committee Date	Funding Date
Approved By Loan Officer Date	Approved/Decline By Credit Committee Date	Initial Advance for Line of Credit
ID Verification - Type of ID	ID Number ID Issue Date	ID Expiration Date

Credit Committee Notes _____