



# UKRAINIAN SELFRELIANCE MICHIGAN FEDERAL CREDIT UNION

Acct No \_\_\_\_\_

Note No \_\_\_\_\_

Applicant Name			Address (street, city, state, ZIP)			
Social Security Number	Birth Date	Home Phone		Work Phone	Cell Phone / Other	
Loan Amount Applied for: \$		For a period of: <input type="checkbox"/> Weeks <input type="checkbox"/> Months		To be repaid: <input type="checkbox"/> weekly <input type="checkbox"/> semi-monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> monthly		
Paid in installments of: \$ each		<input type="checkbox"/> including interest <input type="checkbox"/> plus interest		First payment to be due on:		
I desire this loan for the following purpose (explain fully):						
Collateral Offered: <input type="checkbox"/> None	<input type="checkbox"/> Shares: \$	acct#	<input type="checkbox"/> Auto:	Year	Make	
			<input type="checkbox"/> Other:	(describe)	VIN	
Owner(s) of Collateral:						
Are relying on income from another person to repay this loan?			You need not disclose the following sources of income; but if you want the credit union to consider such income in connection with this loan application, please complete the following:			
<input type="checkbox"/> No	Name					
<input type="checkbox"/> Yes	Address		Alimony \$      Child Support \$			
I am indebted to the following creditors (List all debts such as doctor bills, real estate, automobile repairs, furniture, installments, loans, etc. Attach additional sheet if necessary):			Separate Maintenance Payments \$			
Indicate with an "X" those obligations you will pay with this loan.			Complete the following only if you have chosen to disclose alimony, Child Support, or separate maintenance income:			
To Whom Owed	Original Amount	Monthly Payments				Balance
I hereby affirm and represent that my total indebtedness and Liabilities on this date are listed above and do not exceed: \$			Complete the following only if you reside in a community property State (AZ, CA, ID, LA, NM, NV, TX, WA): <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried			
Number of Dependents (exclude self)			Auto Owned:      Year      Make			
Are you liable for alimony, child support or separate Maintenance payments? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ / mnth			VIN			
			2 <sup>nd</sup> Auto Owned:      Year      Make			
			VIN			
Employer		Phone	Drivers License Number		State	
Address			Market Value of Real Estate owned \$			
Date Employed			Location Address:			
Position			Name of Landlord:			
Salary \$ per <input type="checkbox"/> week <input type="checkbox"/> month			Monthly Rent: \$			
Previous Employer			List all addresses for past five years			
Length of employment						
Other personal income (do not include alimony, child support Or separate maintenance payments) \$						
Source						

Name and address of nearest relative:		List Credit References:	
Name	Relationship	Name	Address
Address		Name	Address
Have you any Judgements, Garnishments, or Legal Proceedings Against you? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain		Name	Address
Have you ever declared Bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes, year		Bank Reference – Checking & Savings	
Are you a co-maker/guarantor on any other loans? <input type="checkbox"/> No <input type="checkbox"/> Yes Amount \$ For Whom		Additional Information	

I hereby certify that all statements made, including those on the reverse side hereof, are true and complete and submitted for the Purpose of obtaining credit. ( I have used additional paper.) I have no other debts.

If a co-maker is required, also use co-maker Form CM-2 Rev. 3-77

Signature

Date

**THIS SECTION FOR OFFICE USE ONLY**

AUTOMOBILE YEAR/MAKE/MODEL	
VIN	
LIEN PLACED BY	
DEALER	
SALESPERSON	
INSURANCE COMPANY	
POLICY NUMBER	
AGENT PHONE	
LOAN POSTED BY:	
VERIFIED BY:	

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 \_\_\_\_\_, 20\_\_\_\_, 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		APPROVED BY LOAN OFFICER	
Signature	Date	Signature	Date
Signature	Date		
Signature	Date		

All committee members shown as present in the minutes of the meeting at which this application was approved should sign above.

If application is rejected – reason for rejection:

