



Ukrainian Selfreliance Michigan  
Federal Credit Union

Українська Федеральна Кредитова  
Кооператива Самопоміч

LOANLINER®

## Application

**Married Applicants:** May apply for a separate account.

**Individual Credit:** You must complete the **Applicant** section about yourself and the **Other** section about your spouse if:

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI),
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.

**Joint Credit:** Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

**Guarantor:** Complete the **Other** section if you are a guarantor on an account/loan.

☐ **LOANLINER Account/Loan:** ☐ Individual ☐ Joint

(Including ATM/Debit Card Access to the Account if Available)

Amount Requested \$

Purpose/Collateral:

Repayment: ☐ Payroll Deduction ☐ Cash ☐ Military Allotment ☐ Automatic Payment

### PAYMENT PROTECTION

Are you interested in having your loan protected? ☐ Yes ☐ No

If you answer "yes", the credit union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions.

### APPLICANT

NAME

ACCOUNT NUMBER

SOCIAL SECURITY NUMBER

DRIVER'S LICENSE NUMBER/STATE

AGES OF DEPENDENTS

EMAIL ADDRESS

BIRTH DATE

HOME PHONE

CELL PHONE

BUSINESS PHONE/EXT.

PRESENT ADDRESS (Street - City - State - Zip)

☐ OWN ☐ RENT

LENGTH AT RESIDENCE

PREVIOUS ADDRESS (Street - City - State - Zip)

☐ OWN ☐ RENT

LENGTH AT RESIDENCE

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:

☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (Single - Divorced - Widowed)

### EMPLOYMENT/INCOME

NAME AND ADDRESS OF EMPLOYER

TITLE/GRADE

START DATE

HOURS AT WORK

SUPERVISOR'S NAME

IF SELF EMPLOYED, TYPE OF BUSINESS

NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

EMPLOYMENT INCOME

\$ \_\_\_\_\_ Per \_\_\_\_\_

☐ NET ☐ GROSS

OTHER INCOME

\$ \_\_\_\_\_ Per \_\_\_\_\_

SOURCE

MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? ☐ YES ☐ NO

WHERE

ENDING/SEPARATION DATE

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS

STARTING DATE

ENDING DATE

### REFERENCE

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU

RELATIONSHIP

HOME PHONE

### OTHER

☐ CO-APPLICANT ☐ SPOUSE ☐ OTHER

NAME

ACCOUNT NUMBER

SOCIAL SECURITY NUMBER

DRIVER'S LICENSE NUMBER/STATE

AGES OF DEPENDENTS

EMAIL ADDRESS

BIRTH DATE

HOME PHONE

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LENGTH AT RESIDENCE

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☐ NET ☐ GROSS

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