



PO Box 923071 • Sylmar, CA 91392 Ph: 818-367-1057 • Fax: 818-362-3467

Application

1 111 0 10 001 1001	ax. On	3-302-3407								
2. your spouse will use th	t complet rty pledge e accoun	te the Applicanted as collateral	t section about yourself a is located in a communit	and the Other section about your property state (AK, AZ, CA,	ID, LA, N	IM, NV, TX, V				
Joint Credit: Each Applica				u are relying on income from those payments you are relyin tion below. If Co-Borrower is						
box. Guarantor: Complete the (spouse o	in the Applica	it, mark the cor	тррпоот		
☐ LOANLINER Account/L	oan:	Individual	loint	t/loan.	OMEON SECTION					
(Including ATM/Debit Care	Access	to the Account	if Available)							
Amount Requested \$										
Purpose/Collateral:			in the same of the							
Repayment: Payroll De				Automatic Payment						
PAYMENT PROTECTION	volunta	answer "ye: arv and does	not attect your loan	rotected? Yes No will disclose the cost to approval. In order for yo the terms and conditions	protec	t your loan to be cove	. The protected, you will n	tion is eed to		
APPLICANT				OTHER	☐ co-4	APPLICANT [SPOUSE OT	HER		
NAME				NAME						
BIRTH DATE		ACCOUNT NUMBER		DIDTH DATE		TACCOUNT NUM	060			
-,	-		±§.*	BIRTH DATE	/	TACCOUNT NOW	sen.			
AGES OF DEPENDENTS			AGES OF DEPENDENTS							
EMAIL ADDRESS				EMAIL ADDRESS						
HOME PHONE CELL PHO	ONE	WORK PHON	E	HOME PHONE CELL P	HONE	WORK PHO	INE .			
PRESENT ADDRESS (Street - City -	State - Zip)	An \$	MOUNT OF RENT/MORTGAGE	PRESENT ADDRESS (Street - City	- State - Zip)		AMOUNT OF RENT/M	ORTGAGE		
		LE	NGTH AT RESIDENCE			200	LENGTH AT RESIDENCE	ΞE		
PREVIOUS ADDRESS (Street - City	- State - Zip)			PREVIOUS ADDRESS (Street - City	- State - Zip)				
COMPLETE FOR JOINT CREDIT, SE PROPERTY STATE:	CURED CRE	DIT OR IF YOU LIVE	IN A COMMUNITY	COMPLETE FOR JOINT CREDIT, S PROPERTY STATE:	ECURED CRE	DIT OR IF YOU LI	VE IN A COMMUNITY			
MARRIED SEPARATED	UNMARR	IED (Single - Divorce	d - Widowed)	MARRIED SEPARATED	UNMARE	IED (Single - Divo	ced - Widowed)			
EMPLOYMENT/INCOME				EMPLOYMENT/INCOME						
NAME AND ADDRESS OF EMPLOYER				NAME AND ADDRESS OF EMPLOYER						
TITLE/GRADE	START	DATE	HOURS AT WORK	TITLE/GRADE	STAR	T DATE	HOURS AT WORK			
SUPERVISOR'S NAME		F EMPLOYED, TYPE		SUPERVISOR'S NAME	IF SEL	F EMPLOYED, TYP	PE OF BUSINESS			
NOTICE: ALIMONY, CHILD SUPPO REVEALED IF YOU DO NOT CHOOSE	RT, OR SE SE TO HAVE	IT CONSIDERED.	ANCE INCOME NEED NOT BE	NOTICE: ALIMONY, CHILD SUPPREVEALED IF YOU DO NOT CHOO			NANCE INCOME NEE	D NOT BE		
EMPLOYMENT INCOME \$Per		OTHER INCOME \$	Dec	EMPLOYMENT INCOME		OTHER INCOME	_			
□ NET □ GROSS		SOURCE	_ Per	\$Per		\$	Per			
MILITARY: IS DUTY STATION TRA	VSEER EXPE		T VEAD2 T LVGD L LVG	□ NET □ GROSS		SOURCE				
WHERE			ARATION DATE	MILITARY: IS DUTY STATION TRA	ANSFER EXPE		XT YEAR? YES	□₩٥		
PREVIOUS EMPLOYER NAME AND . FIVE YEARS	ADDRESS IF	EMPLOYED LESS T	HAN STARTING DATE	PREVIOUS EMPLOYER NAME AND FIVE YEARS	ADDRESS IF	EMPLOYED LESS	THAN STARTING	DATE		
			ENDING DATE				ENDING DA	\TE		
REFERENCE			RELATIONSHIP	REFERENCE			RELATIONS)HIP		
NAME AND ADDRESS OF NEAREST	RELATIVE N	OT LIVING WITH Y	HOME PHONE	NAME AND ADDRESS OF NEARES	T RELATIVE N	NOT LIVING WITH	YOU HÔME PHO	NE		
CUNA MUTUAL COM										

WHAT YOU OWE		DITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)				PRESEN	CE	MONTHLY PAYMENT		OWE			
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LICT ANY MANAGE LINDER WILL	NA VOLID ODEDLE DEFEDEN	CEC AND CDE	DIT HISTORY CAN BE	CHECK	ED.	TOTAL 0	\$		\$				-
LIST ANY NAMES UNDER WHIC	CH YOUR CREDIT REFEREN	LES AND CHE	DIT HISTORY CAN BE	CHECK	leb:	TOTALS	\$		\$				
WHAT YOU OWN LIST LOCATION OF PROPERTY OR FINANCIAL INSTITU			ISTITU	TION				PLEDGED AS COLLATERAL FOR ANOTHER LOAN			OWNED BY		
				-		\$			YES	Т	NO	AFFLICAN	OTHER
				-		\$			YES		NO		
				_		\$			YES		NO		
						\$			YES		NO		
						\$			YES		NO		
						\$			YES		NO		
						\$			YES		NO		
						\$			YES		NO		
		sol .				\$			YES		NO		
	OR PERMANENT RESIDENT	ALIEN? DGMENTS OF	UPON OR REPOSSESS	D FOR	BANKRUPTCY,	HAD A DEBT ADJU	JSTMENT F	PLAN	-	APPI	ICAN	т от 	HER
4. ARE YOU A CO-MAKER, (FOR WHOM (Name of Oth	CO-SIGNER OR GUARANTO ers Obligated on Loan):	R ON ANY LO			M (Name of Cred	ditor):							
make credit equally ava reporting agencies mai upon request. The Ohio with this law.	against discrimir ilable to all creditwor ntain separate credi o Civil Rights Comm	nation requ thy custor t histories ission adn	on each individ ninisters compliar	ors edit lual nce	decree, or or the acca account or	Credit Union is has actual knoount is opened loan with you neurred in the	owledge d. (2) Ple r spouse	of its ease si e. The	terms, gn if y credit l	before ou are being a	the not pplie	credit is applying d for, if	granted for this granted,
WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree				ree	X								
under Section 766.70 will adversely affect the rights of the Credit Union					SIGNATURE FOR WISCONSIN RESIDENTS ONLY DATE								
You promise that every to the best of your I			application is corr	ect		ou understand							
complete listing of wha will notify us in writing obtain credit reports in any update, increase,	t you owe. If there a g immediately. You n connection with thi	re any im authorize s applicati	portant changes y the Credit Union on for credit and	to for	request, the bureau from to willfully loan applic	ne Credit Union m which it rec and deliberate cations made to ured by NCUA.	will tell eived a ely provid to federa	l you ti credit de inco	he nam report implete	ne and on you e or inc	addr . It is orrec	ess of ar s a feder ct inform	ny credit al crime ation on
X			(SEAL)		X						(SEA	L)	
APPLICANT'S SIGNATURE			DATE		OTHER SIGNA	TURE		*****				DATE	
			FOR CRI	EDIT	UNION USE	ONLY							
	PROVED	APPROVED LIMITS:	SIGNATURE	L	INE OF CREDIT	OTHER		ОТІ	HER			DEBT RATIO	O/SCORE AFTER
	NIED dverse Action Notice Sent)		\$	\$		\$		\$					
LOAN OFFICER COMMENTS:													
SIGNATURES:					х								
-			DATE	_								DATE	