



MAIN OFFICE 800 Falls Creek Drive, Vandalia, Ohio
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TROY BRANCH 1341 Wayne Street, Troy, Ohio
 •Phone: 937-335-7500 •Toll Free: 866-335-7555 •Fax: 937-339-0401

APPLICANT

NAME (Last) _____ First _____ Initial _____

Acct. Number _____ Soc. Sec. Number _____ Birthdate _____ Home Phone _____ Bus. Phone / Extension _____

Address (Street) _____ City _____ State _____ Zip Code _____

Years at this address: _____ OWN RENT Number of dependents other than listed by applicants (exclude self): _____ Ages: _____

EMPLOYMENT INFORMATION (If less than 1 year, list previous employment below **)

Employer Name _____ Number of years with employer _____ Gross monthly income \$ _____

Address (Street) _____ City _____ State _____ Zip Code _____

****PREVIOUS EMPLOYMENT INFORMATION**

Employer Name _____ Number of years with employer _____ Gross monthly income \$ _____

Address (Street) _____ City _____ State _____ Zip Code _____

- Co-Applicant** **Spouse** **Guarantor (Cosigner)**

NAME (Last) _____ First _____ Initial _____

Acct. Number _____ Soc. Sec. Number _____ Birthdate _____ Home Phone _____ Bus. Phone / Extension _____

Address (Street) _____ City _____ State _____ Zip Code _____

Years at this address: _____ OWN RENT Number of dependents other than listed by applicants (exclude self): _____ Ages: _____

EMPLOYMENT INFORMATION

Employer Name _____ Number of years with employer _____ Gross monthly income \$ _____

Address (Street) _____ City _____ State _____ Zip Code _____

Notice: Alimony, child support or separate maintenance income need not be revealed if you do not choose to have it considered.

Other Income \$ _____ Source: _____

Money you are requesting \$ _____ Purpose: _____ Year/Make of Car (if car loan) _____

Requested loan term: _____

DEBTS	DESCRIPTION	CREDITOR Name & Address	ACCT. NUMBER	PRESENT BALANCE	PAYMENT
	Rent/Mortgage (Inc. Taxes & Ins.)			\$	\$
	Second Mortgage				
	Auto Loan				
	Auto Loan				
	Credit Card				
	Credit Card				
	Other				

I/We certify the information above is correct and complete. I/We authorize the credit union to obtain credit reports in connection with this application. I/We understand that additional information may be requested to complete this application.

Applicant _____ Date _____ Co-Applicant _____ Date _____

Approved by _____