



P.O. Box 645
Brenham, TX 77834-0645

LOAN APPLICATION

MARRIED APPLICANTS may apply for a separate account. A Credit Union may only extend direct credit to a member. A Joint applicant for credit will be considered a guarantor or co-signer if such person is not a credit union member. **Check the type of credit account you wish to apply for.**

- Individual Credit** – You must complete the applicant section about yourself and the other section about your spouse if:
You live in a community property state (AK, AZ, CA, ID, NM, NV, P.R., TX, WA, WI) or your Spouse will use the account, or you are relying on your spouse's income as a source of repayment.
- Joint Credit** – If you are applying for a joint account or an account that you and another person will use, you must complete the applicant and other section.
If you intend to apply for joint credit, you understand that the Credit Union may need to document any non-member as a guarantor/co-signer as explained above.
- Applicant Signature X _____ Co-Applicant Signature X _____

PAYMENT PROTECTION (Check Coverage(s) Desired)

PAYMENT PROTECTION IS AVAILABLE ON LOANS MADE TO CREDIT UNION MEMBERS. INSURANCE IS VOLUNTARY AND NOT REQUIRED TO OBTAIN CREDIT.

- YES SINGLE CREDIT LIFE INSURANCE YES JOINT LIFE CREDIT INSURANCE YES SINGLE CREDIT DISABILITY INSURANCE
- NO NO NO

THE CREDIT UNION WILL DISCLOSE THE COST OF THIS VOLUNTARY INSURANCE TO YOU. A SEPARATE INSURANCE ELECTION DISCLOSING THE TERMS AND CONDITIONS MUST BE SIGNED FOR COVERAGE TO BE EFFECTIVE.

LOAN AMOUNT REQUESTED	TO BE REPAYED IN MONTHS	PURPOSE OF LOAN AND COLLATERAL OFFERED
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APPLICANT SECTION ■ CO-APPLICANT ■ CO-SIGNER/GUARANTOR SECTION

Name	Account Number	Spouse/Co-Applicant's Name	Account Number
Street Address	County	Street Address	County
City, State, Zip	How Long Yrs. Mos.	City, State, Zip	How Long Yrs. Mos.
Driver's License Number/State		Driver's License Number/State	
Social Security Number	Date of Birth	Social Security Number	Date of Birth
Home Phone ()	Work ()	Home Phone ()	Work ()
Previous Address		Previous Address	
Employer		Employer	
Employer's Address (City & State)	Date Employed	Employer's Address (City & State)	Date Employed
Job Title	Supervisor's Name & Phone No.	Job Title	Supervisor's Name & Phone No.
Applicant's Salary <input type="checkbox"/> Weekly Net \$ _____ <input type="checkbox"/> Monthly	Additional Income & Source* \$ _____	Co-Applicant's Salary <input type="checkbox"/> Weekly Net \$ _____ <input type="checkbox"/> Monthly	Additional Income & Source* \$ _____
Former Employer	Dates Employed From: To:	Former Employer	Dates Employed From: To:
Nearest Relative's Name (not living with me)	Phone No. ()	Nearest Relative's Name (not living with me)	Phone No. ()
Relative's Address & their relationship to me (father, mother, etc.) _____		Relative's Address & their relationship to me (father, mother, etc.) _____	

*Alimony, child support, or separate maintenance need not be revealed if I do not wish to have it considered as a basis for repaying obligations under this contract.

FINANCIAL OBLIGATIONS OF BOTH APPLICANT AND CO-APPLICANT—PLEASE INCLUDE ALL OBLIGATIONS - USE SEPARATE SHEET IF NECESSARY

Residence: Own Rent	Balance	Monthly Payment	Interest Rate
Vehicle #1 Yr. Make: Model: Financed With:			
Vehicle #2 Yr. Make: Model: Financed With:			
List all obligations including Credit Cards (if there is not sufficient space, attach a separate sheet)			

Alimony/Child Support (Check one, if applicable)
 Court Ordered Written Agreement Oral Understanding

YOU AGREE TO PROMPTLY REPAY ANY LOAN OR CREDIT EXTENDED ACCORDING TO THE TERMS THEREON.

NOTICE: You agree and attest that your name and address shown herein is your legal name and the place of your residence, and such address is the proper address for all notice(s) required by this Agreement, and you further understand that any changes in this address must be submitted to us in writing to be effective.

The USA Patriot Act requires that we obtain, verify, and record information that identifies each person who opens an account. The credit union may ask for proof of identity.

You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to state chartered credit unions insured by NCUA.

APPLICANT SIGNATURE _____ DATE _____ OTHER APPLICANT'S SIGNATURE _____ DATE _____

X

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