

MARBLEHEAD MUNICIPAL

Employees Federal Credit Union

7 Widger Road
Marblehead, MA 01945

PHONE: 631-7356 FAX 781-639-8717

LOAN APPLICATION – CONSUMER

DATE	APPLICANT ACCOUNT NUMBER	CO-APPLICANT ACCOUNT NUMBER

CREDIT UNION LOAN Features applied for:

Line of Credit: New Account: Credit Limit Increase: Purpose of Loan: _____
 Limit \$ _____
 Collateral Secured Requested Amount \$ _____
 Collateral Offered _____ Owned By _____

MARRIED APPLICANTS MAY APPLY FOR INDIVIDUAL ACCOUNTS. INDICATE BELOW THE TYPE OF CREDIT WANTED

- INDIVIDUAL CREDIT:** Complete Applicant Section. Complete other section if the following applies: You live in a community property state (AZ, CA, ID, LA, NM, NY, P.R., TX, WA, WI) or your spouse will use the account - You are relying on your Spouse/Co-Applicant's income as a source of repayment.
 JOINT CREDIT: Provide information about both of you.

Complete for secured credit or if you live in a community property state

MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

Complete for secured credit or if you live in a community property state

MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

APPLICANT

FIRST NAME	INITIAL	LAST NAME	
SOCIAL SECURITY #	DRIVER'S LICENSE #	BIRTHDATE	
HOME PHONE NUMBER	NO. OF DEP.	AGE OF DEPENDENTS	
CURRENT STREET ADDRESS	APT. NO.	YEARS THERE	
CITY	STATE	ZIP	
FORMER STREET ADDRESS	YEARS THERE		
CITY	STATE	ZIP	

CO-APPLICANT GUARANTOR

FIRST NAME	INITIAL	LAST NAME	
SOCIAL SECURITY #	DRIVER'S LICENSE #	BIRTHDATE	
HOME PHONE NUMBER	NO. OF DEP.	AGE OF DEPENDENTS	
CURRENT STREET ADDRESS	APT. NO.	YEARS THERE	
CITY	STATE	ZIP	
FORMER STREET ADDRESS	YEARS THERE		
CITY	STATE	ZIP	

EMPLOYMENT AND INCOME

If self employed, attach financial statement and income tax return.

CURRENT EMPLOYER	HIRE DATE		
STREET ADDRESS			
CITY	STATE	ZIP	WORK PHONE NUMBER
POSITION	MONTHLY NET INCOME		
SUPERVISOR'S NAME AND PHONE #			\$
FORMER EMPLOYER - Name/Address/Phone			YRS.

CURRENT EMPLOYER	HIRE DATE		
STREET ADDRESS			
CITY	STATE	ZIP	WORK PHONE NUMBER
POSITION	MONTHLY NET INCOME		
SUPERVISOR'S NAME AND PHONE #			\$
FORMER EMPLOYER - Name/Address/Phone			YRS.

OTHER INCOME

You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit.

SOURCE OF OTHER INCOME 1	PHONE NUMBER	MONTHLY INCOME
		\$
SOURCE OF OTHER INCOME 2	PHONE NUMBER	MONTHLY INCOME
		\$

SOURCE OF OTHER INCOME 1	PHONE NUMBER	MONTHLY INCOME
		\$
SOURCE OF OTHER INCOME 2	PHONE NUMBER	MONTHLY INCOME
		\$

PERSONAL REFERENCES INDICATE

A = Applicant C = Co-Applicant

A	C	NEAREST RELATIVE NOT LIVING WITH YOU - NAME/ADDRESS/PHONE	RELATIONSHIP
		PERSONAL REFERENCE (Not a Relative) - NAME/ADDRESS/PHONE	KNOWN SINCE

ASSETS AND DEPOSITS

LIST ALL ASSETS - ATTACH SEPARATE SHEET IF NECESSARY A = APPLICANT C = CO-APPLICANT

CHECK		TYPE	FINANCIAL INSTITUTION	APPROXIMATE BALANCE	CHECK		TYPE	FINANCIAL INSTITUTION	APPROXIMATE BALANCE
A	C				A	C			
		CHECKING		\$			MONEY MARKET	\$	
		SAVINGS		\$			CD'S	\$	
		IRA'S		\$			OTHERS	\$	
CAR 1: YEAR/MAKE				VALUE \$	CAR 2: YEAR/MAKE				VALUE \$
REAL ESTATE				VALUE \$	OTHER				VALUE \$

CREDIT INFORMATION

Be sure to list all open accounts with or without a balance. Attach separate sheet if necessary.

A = APPLICANT C = CO-APPLICANT

INDICATE		TYPE OF LOAN	LENDERS (OR OTHER OBLIGATIONS) NAME LIST ALL OTHER CREDIT UNION AND BANKS	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENTS
A	C					
		<input type="checkbox"/> MORT				
		<input type="checkbox"/> RENTAL				
		<input type="checkbox"/> Alimony <input type="checkbox"/> Child Support				

Please answer the following questions. If a yes answer is given, explain on attached sheet.

Please indicate A = Applicant C = Co-Applicant	A		C			A		C	
	YES	NO	YES	NO		YES	NO	YES	NO
1. Have you ever filed a petition for bankruptcy? Date					5. Is any income you have listed likely to reduce in the next two years?				
2. Have you ever had any auto, furniture or property repossessed? Date					6. Have you ever had credit in any other name? What Name? _____				
3. Are you a co-maker or guarantor of any loan or lease? For Whom? Where?					7. Have you any suits pending, judgements filed, alimony or support awards against you?				
4. Do you have any past due bills?					8. Are you other than a United States citizen or resident alien?				

You agree that everything stated in this application, whether oral, written, or through a FAX machine, is true and correct to the best of your knowledge. The Credit Union or its agent is authorized to investigate your credit worthiness, employment history, and to obtain a credit report and to answer questions about their credit history with you. You understand that any false or misleading statements in your application may cause any loan to be in default. You agree that this application shall be the Credit Union's property whether or not this Credit Application is approved. You agree under the pains and penalties of perjury and state that you have listed all of your debts and obligations on this application.

APPLICANT SIGNATURE	DATE	CO-APPLICANT SIGNATURE	<input type="checkbox"/> GUARANTOR	DATE
(Seal)		(Seal)		

FOR CREDIT UNION USE ONLY — DO NOT FILL IN BELOW THIS LINE

Repayment Record: Prompt Fair Poor Comment by Treasurer or Credit Department

LOAN OFFICER ACTION

Loan Officer: I approve the loan as submitted. Special conditions of approval if any

Loan referred to C. C. Reason _____

LO Signature _____ Date _____

CREDIT COMMITTEE ACTION

APPROVED (subject to special conditions set forth below):

Credit Committee: _____

FIRCOA Notice and Reason for Rejection sent or delivered on _____

DISAPPROVED (for the following reason):

The following counter offer will be made to the applicant and if accepted, we approve the loan.

Describe: _____

Outside information considered: No Yes (describe _____)

Credit Committee _____