

South Community Credit Union
Credit Application – Page 1
(Do not use to apply for home equity line of credit)

I am applying for:

Individual Credit Joint Credit

I am applying for the following loan:

Share Loan Signature Loan Collateral Loan
 Line Of Credit Co-Maker Loan

Date: _____

Applicant

Name: _____

Account #: _____

Address: _____

City, State, Zip: _____

Rent

Years At Residence: _____

Landlord Name: _____

Landlord Phone #: _____

Monthly Payment: \$ _____

Are Payments Up To Date? Yes No

Own

Years At Residence: _____

Present Value: _____

Mortgage Balance: \$ _____

Monthly Payment: \$ _____

Are Payments Up To Date? Yes No

Previous Address (*If less than 3 years at present*): _____

Phone #: _____

Social Security #: _____

Date Of Birth: _____

Of Dependents: _____

Loan Purpose: _____

Loan Amount: \$ _____

For Refinances Only

Current Balance: \$ _____

Of Payments: _____

Payment Amount: \$ _____

Employer: _____

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I owe all other creditors (*exclusive of the debts above*) a total of \$ _____. I am not indebted other than stated above. The statements here are made for the purpose of obtaining the loan and are true to the best of my knowledge and belief. You are hereby authorized to make any credit investigation the credit committee deems necessary. I understand there is a \$25 minimum balance in shares/savings for the life of the loan.

Witness: _____ Applicant's Signature: _____

Joint Applicant

Name: _____

Social Security #: _____

Address: _____

City, St, Zip: _____

Phone #: _____

Date Of Birth: _____

Of Dependents: _____

Are You An SCCU Member? Yes No

Employer: _____

Position: _____

Years Of Service: _____

Employer Phone #: _____

Gross Salary: \$ _____

Weekly Bi-Weekly Monthly Annually

Relationship To Applicant: _____

I, undersigned, have read the applicant's complete application. I believe him/her to be worthy of a loan, and I am agreeable to become a co-maker on this note, with the complete understanding that I may be solely liable for the full unpaid balance in case of default by the maker. You are hereby authorized to make any credit investigation the credit committee deems necessary.

Joint Applicant Signature: _____

Optional Collateral Offered

Year: _____

Make: _____

Model: _____

Body Style: _____

VIN: _____

CYL: _____

Mileage: _____

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Equipment

- Automatic Transmission Air Conditioning AM/FM Radio CD
 Power Brakes Power Steering Power Windows Power Seats
 Power Sunroof Leather Interior 4 Wheel Drive

Insurance Carrier Name: _____

Address: _____

Before submitting your application, please provide the following:

- Copy Of Current Payroll Stubs
- Copy Of Current Tax Return (*If self-employed*)

For Auto Loans

- Copy Of The Buyers' Retail Sheet (*From the dealership*)
- Individual's Name & Complete Information On The Vehicle (*If buying privately*)

We must have the title in our possession before we can release the loan money.

For SCCU use only

Approved Not Approved

Remarks: _____

Signature: _____