



312.922.5310
myusecu.org

NCUA

Federally insured by NCUA



PLEASE SUBMIT MOST RECENT PAY STUB(S)

SELECT ONE (1): Individual Account Joint Account

USECU Member Number _____

Co-Applicant's Member Number _____

Non-Member Social Security Number _____

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Amount Requested		Purpose Of Loan									
Type Of Loan	Holiday / Vacation / Promo Signature Credit Rebuilder	Flex / Overdraft Line Of Credit Share Secured	<table border="1"> <tr> <td>New Vehicle</td> <td>Make _____</td> </tr> <tr> <td>Used Vehicle</td> <td>Model _____</td> </tr> <tr> <td>Title Secured</td> <td>Year _____</td> </tr> <tr> <td>Payment Saver</td> <td></td> </tr> </table>	New Vehicle	Make _____	Used Vehicle	Model _____	Title Secured	Year _____	Payment Saver	
New Vehicle	Make _____										
Used Vehicle	Model _____										
Title Secured	Year _____										
Payment Saver											

APPLICANT

Full Name		Last	First	Date Of Birth
Home Street Address, Apt #, City, State, Zip Code				Driver's License No. & State
Home Phone No. (With Area Code)	How Long At Address (Years & Months)	Own	Rent	E-mail Address
		Rent Amt. \$ _____	Other (Explain)	
Previous Home Address, Apt #, City, State, Zip Code (If less than three years)				How Long At Previous Address (Years & Months)
Present Position	Present Employer	Monthly Income From Job	How Long (Years & Months)	
		\$ _____		
Business Address, City, State, Zip Code				Business Phone No. (With Area Code)
Previous Employer	Position	Previous Employer's City, State	How Long (Years & Months)	
Income from alimony, child support or separate maintenance payments need not be revealed if you do not choose to have it considered as a basis for repaying this obligation.		Monthly Amount Of Other Income	Source Of Other Income	
		\$ _____		
Name Of Nearest Relative Not Living With You	Address, City, State, Zip Code	Relationship	Phone No. (With Area Code)	

SPOUSE OR CO-APPLICANT **FILL OUT ONLY IF "JOINT" ACCOUNT**

Full Name		Last	First	Date Of Birth	E-mail Address
Home Street Address, Apt #, City, State, Zip Code				Social Security No.	Home Phone No. (With Area Code)
Present Employer	Employer Address, City, State, Zip Code			How Long (Years & Months)	
Business Phone No. (With Area Code)	Monthly Income From Job	Monthly Other Income	Source of Other Income		
	\$ _____	\$ _____			



FINANCIAL INFORMATION

Mortgage	Approx. Market Value \$ _____	Original Balance \$ _____	Current Balance \$ _____	Monthly Payment \$ _____
Autos Owned - Make	Year		Financed By	
MARITAL STATUS: Check your marital status only if you live in a community property state — (AZ, CA, ID, LA, NV, NM, TX, WA, WI) <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated under decree of legal separation				

PAYMENT PROTECTION

Check below if you are interested in Payment Protection coverage information. USECU will disclose details regarding the voluntary coverage and provide a separate Payment Protection Application prior to coverage enforcement.

I am am not interested in obtaining information about Payment Protection Plans

PLEASE SIGN HERE APPLICANT AND CO-APPLICANT MUST SIGN BELOW

By signing below, you agree to be bound by the terms of the agreement which will be furnished to you. You also certify that everything you have stated in the application is correct to the best of your knowledge. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, renewal or extension of credit received.

X _____
Applicant Member Signature

X _____
Co-Applicant Signature

Date

Date

**CREDIT
UNION
USE
ONLY**

Approved Denied

Counter Offer

\$ _____

Credit Limit

\$ _____

Comments/Conditions

Authorized Signature _____

Authorized Signature _____