

SUMMER LOAN SALE APPLICATION

ROCHESTER & MONROE COUNTY FEDERAL CREDIT UNION

FAXED APPLICATIONS NOT ACCEPTED

PLEASE PRINT & ATTACH A PAYROLL STUB TO YOUR APPLICATION

Amount Requested	Months to Repay	Are you interested in: Life Ins. <input type="checkbox"/> Yes <input type="checkbox"/> No And / Or	Disability Ins. <input type="checkbox"/> Yes <input type="checkbox"/> No
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If income from a spouse will be relied upon as a basis of repayment, complete both shaded and unshaded area.

PERSONAL INFORMATION

Applicant Name (Last, First, Middle)				Co-Applicant Name (Last, First, Middle)				Relationship			
Home Address (Street)			Years There		Home Address (Street)			Years There			
City, State, Zip					City, State, Zip						
Cell Phone ()			Home Phone ()		Cell Phone ()			Home Phone ()			
Previous Address			Years There		Previous Address			Years There			
Social Security No.		Date of Birth		No. of Dependents <small>(Including Self)</small>		Social Security No.		Date of Birth		No. of Dependents <small>(Including Self)</small>	

EMPLOYMENT INFORMATION

Present Employer					Present Employer						
Address					Address						
Years With Company		(PT)	(FT)	Hours Worked Per Week		Years With Company		(PT)	(FT)	Hours Worked Per Week	
Position		Gross Wages \$		<input type="checkbox"/> Week <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly		Position		Gross Wages \$		<input type="checkbox"/> Week <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly	
Business Phone #				Extension		Business Phone #				Extension	
Dept. Name			Supervisor		Dept. Name			Supervisor			

OTHER INCOME * Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repayment.

* Other Income \$	Source (Name and Address)	* Other Income \$	Source (Name and Address)
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CREDIT INFORMATION

BOTH APPLICANT AND CO-APPLICANT MUST COMPLETE THIS SECTION

() Own () Rent () Live with Relative	Present Mortgage Co., Landlord, Relative	() Own () Rent () Live with Relative	Present Mortgage Co., Landlord, Relative
Monthly Mortgage / Rent Payment (Include taxes and insurance) \$		Monthly Mortgage / Rent Payment (Include taxes and insurance) \$	

FINANCIAL OBLIGATIONS List loans, charge cards, credit lines, and payments for alimony, child support. Failure to list all debts may disqualify your request. If more space is needed, attach an additional sheet. Please indicate by (*) if any of these debts will be paid off from proceeds of this loan.

Creditor & Account Number	*	Type of Loan	Monthly Payment	Balance	Creditor & Account Number	*	Type of Loan	Monthly Payment	Balance

Are you now or have you been subject to any judgments, garnishments, bankruptcy or other legal proceedings?
Applicant () No () Yes If yes, attach a letter of explanation.

Co-Applicant () No () Yes If yes, attach a letter of explanation.

PLEASE READ, SIGN AND DATE STATEMENT

You represent everything stated in this application is correct to the best of your knowledge. You further represent you have provided a complete listing of all your debts and obligations. You authorize the credit union to investigate your credit record, verify your employment and income information, and answer questions regarding your credit history. You also authorize the credit union to obtain credit reports in connection with this application and for any update, renewal or extension of the credit received. If you request it, 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 federal credit unions or state chartered credit unions insured by the National Credit Union Administration.

Applicant's Signature X	Date	Co-Applicant's Signature X	Date
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