

Chen-Del-O Federal Credit Union

114 Main Street - PO Box 102
Franklin NY 13775-0102
607-829-3560 - 800-462-0320



CONSUMER LOAN APPLICATION

ACCOUNT NUMBER	DATE
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MARRIED APPLICANTS may apply for a separate account. **Check the type of credit account for which you wish to apply.**
 Individual Credit – You must complete the applicant section about yourself and the other section about your spouse if: (1) You live in a community property state (AK, AZ, CA, ID, LA, NM, NV, P.R., TX, WA, WI); (2) your spouse will use the account; or (3) 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 Spouse Co-Applicant section.
 _____ Initial here if you intend to apply for Joint Credit

Type of Credit Applied For:
 Loan Type (auto, credit card, signature): _____ Amount Requested: _____ Term (mos) _____
 Purpose: _____ Collateral Offered: _____
 Payment Method: Cash Military Allotment Payroll Deduction Automatic Payment
 Payment Frequency: Monthly Other _____
 Authorized User Name (credit card only): _____

Notice To Credit Card Applicants: Please refer to the Important Credit Disclosure on the back of this application for information regarding the costs associated with the use of your Credit Card. You further understand that your use or allowing the card to be used will constitute acknowledgment, receipt and your agreement to the terms and conditions of the credit card agreement provided to you with the card.

APPLICANT **CO-SIGNER**

Complete for secured credit or if you live in a community property state.
 MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

APPLICANT NAME _____

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	NO. OF DEP.	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	E-MAIL ADDRESS	
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP CODE		
FORMER STREET ADDRESS (if current less than 2 years)	YEARS THERE	
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	PHONE NO. & RELATIONSHIP	
PERSONAL REFERENCE 2 (Name and Address)	PHONE NO. & RELATIONSHIP	

SPOUSE **CO-APPLICANT**

Complete for secured credit or if you live in a community property state.
 MARRIED SEPARATED UNMARRIED (Single, Divorced, Widowed)

SPOUSE/CO-APPLICANT NAME _____

SOCIAL SECURITY NO.	DRIVER'S LICENSE NO. & STATE	BIRTH DATE
HOME PHONE NO.	NO. OF DEP.	DO YOU: <input type="checkbox"/> OWN <input type="checkbox"/> RENT
MOTHER'S MAIDEN NAME	RELATIONSHIP TO APPLICANT	
CURRENT STREET ADDRESS	APT. NO.	SINCE
CITY/STATE/ZIP CODE		
FORMER STREET ADDRESS (if current less than 2 years)	YEARS THERE	
CITY/STATE/ZIP		
PERSONAL REFERENCE 1 (Name and Address)	PHONE NO. & RELATIONSHIP	
PERSONAL REFERENCE 2 (Name and Address)	PHONE NO. & RELATIONSHIP	

EMPLOYMENT & INCOME If you are self-employed, attach a financial statement and your most recent income tax return.

CURRENT EMPLOYER	HIRE DATE	
CURRENT ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME
\$		
FORMER EMPLOYER (if current less than 2 years)		

CURRENT EMPLOYER	HIRE DATE	
CURRENT ADDRESS		
WORK PHONE NO.	POSITION	MONTHLY GROSS INCOME
\$		
FORMER EMPLOYER (if current less than 2 years)		

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	FREQUENCY	MONTHLY INCOME
1.		\$

SOURCE OF OTHER INCOME	FREQUENCY	MONTHLY INCOME
1.		\$

ASSETS & DEPOSITS Please check the appropriate box below. INDICATE: **A** - Applicant **OR** **C** - Spouse/Co-Applicant

CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE	CHECK ONE			FINANCIAL INSTITUTION NAME	CURRENT BALANCE
A	C	TYPE			A	C	TYPE		
				\$				\$	
				\$				\$	
AUTO #1 MAKE		MODEL	YEAR	VALUE	AUTO #2 MAKE		MODEL	YEAR	VALUE
				\$					\$
REAL ESTATE TYPE				VALUE	OTHER ASSETS				VALUE
				\$					\$

CREDIT INFORMATION

Be sure to list all open accounts with or without a balance. Attach separate sheet if necessary
 A - APPLICANT C - SPOUSE/CO-APPLICANT D - DEBTS TO BE PAID OFF IF LOAN IS GRANTED

PLEASE CHECK			LIST ALL OBLIGATIONS INCLUDING CREDIT UNION LOANS	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENTS
A	C	D				
			RENT OR MORTGAGE			

PLEASE ANSWER THE FOLLOWING QUESTIONS AND INDICATE: A = Applicant C = Spouse/Co-Applicant		A		C		A		C	
		YES	NO	YES	NO	YES	NO	YES	NO
1.	Have you ever filed a petition for bankruptcy? Date:								
2.	Have you ever had any auto, or furniture repossessed or property foreclosed upon? Date:								
3.	Are you a co-borrower or co-signer of any loan or lease? For Whom? Where?								
4.	Do you have any past due bills?								
5.	Is income listed likely to be reduced in the next two years?								
6.	Have you ever had credit in any other name? What Name?								
7.	Have you any suits pending, judgments filed, alimony or child support awards against you?								
8.	Are you on temporary work assignment or internship?								
9.	Are you other than a U.S. citizen or permanent resident alien?								

OPTIONAL CREDIT INSURANCE – The Credit Union will disclose the cost of voluntary insurance to you. A separate insurance election that discloses the terms and conditions must be signed for coverage to become effective.

You are interested in: Single Credit Life Insurance Joint Credit Life Insurance Single Credit Disability Insurance Joint Credit Disability Insurance

IMPORTANT MASTERCARD DISCLOSURE INFORMATION

Annual Percentage Rate (APR) for Purchases, Cash Advances and Balance Transfers	Variable Rate Information	Grace Period For Purchases	Balance Calculation Method for Purchases	Minimum Finance Charge	Annual Fee	Late Fee	Over Limit Fee	Cash Advance Fee
Classic MasterCard 11.90%	None	You have 25 days from the closing date of the statement cycle to repay your balance before a finance charge on new purchases will be imposed.	Average daily balance (including new purchases)	None	None	\$20	None	None
Platinum MasterCard 9.90%		No grace period for cash advances or balance transfers.						

Other Fees: Replacement Card Fee: \$10, Returned Check Fee: \$25, Foreign Transaction Fee: 1% of transaction amount
 The information about the costs of the Card described in this application is accurate as of June 1, 2009. This information may change after that date. To find out what may have changed, call 607-829-3560 or write to us at: Chen-Del-O FCU, PO Box 102, Franklin, NY 13775.

SIGNATURES – Are you currently on active military duty? Yes No

You promise that the information stated in this Total Loan Consumer Loan Application 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 its credit history with you. The Credit Union may also obtain credit reports to update, increase, extend or renew credit with you. 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 application is approved. You will notify the Credit Union in writing immediately of any changes in your name, address or employment. You understand that it is a crime to willfully and deliberately provide incomplete or incorrect information to obtain credit. If you request, you will be provided the name and address of any credit bureau from which we received a credit report. **As security for any loan to you or on your behalf, you grant the Credit Union a Security Interest in all individual and joint share or other accounts you have with the Credit Union now and in the future. When you are in default you authorize the Credit Union to take that money and apply it to what you owe. Shares and deposits that would have an adverse tax consequence if pledged as security are not subject to this Security Interest.** To help the government fight the funding of Terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license and other identifying information.

X _____ Date _____ X _____ Date _____
 Applicant/Co-Signer Spouse/Co-Applicant

Credit Union Use Only

Loan Approved <input type="checkbox"/> Yes <input type="checkbox"/> No, reason _____	Comments: Loan Officer Signature _____ Date _____
Debt Ratio/Score: Before _____ After _____	
<input type="checkbox"/> ECOA Notice and reason for Rejection sent or delivered on _____	X