



PLANITES CREDIT UNION
 300 E. Randolph • Chicago, Illinois 60601-5099
 312/653-6380 • FAX 312/616-3728

Member No. _____

Note Number _____

Date _____ 20____

LOAN APPLICATION

Individual Credit: You must complete the **Applicant** section about yourself and the **Other** section about your spouse if:
 1. you live in or the property pledged as collateral is located in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI),
 2. your spouse will use the account, or
 3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.
Joint Credit: Each Applicant must **individually** complete the appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.
Guarantor: Complete the **Other** section if you are a guarantor or a co-signor on Loan.

Check below to indicate the type of account(s) and type of credit for which you are applying. Married Applicants may apply for a separate account.
 Individual Joint Amount Requested \$ _____ Purpose/Collateral: _____

PAYMENT PROTECTION **We offer temporary Disability Insurance on Loans. Please check one.**
 I would I would not like Disability Insurance

APPLICANT	OTHER
NAME (Last - First - Initial)	NAME (Last - First - Initial)
MOTHER'S MAIDEN NAME ACCOUNT NUMBER	MOTHER'S MAIDEN NAME ACCOUNT NUMBER
SOCIAL SECURITY DRIVER'S LICENSE NUMBER/STATE	SOCIAL SECURITY DRIVER'S LICENSE NUMBER/STATE
BIRTH DATE NUMBER OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)	BIRTH DATE NUMBER OF DEPENDENTS NOT LISTED BY OTHER APPLICANT (Exclude Self)
HOME PHONE BUSINESS PHONE/EXT. () ()	HOME PHONE BUSINESS PHONE/EXT. () ()
EMAIL ADDRESS	EMAIL ADDRESS
PRESENT ADDRESS (Street - City - State - Zip) OWN RENT	PRESENT ADDRESS (Street - City - State - Zip) OWN RENT
_____ YEARS AT THIS ADDRESS	_____ YEARS AT THIS ADDRESS
PREVIOUS ADDRESS (Street - City - State - Zip) OWN RENT	PREVIOUS ADDRESS (Street - City - State - Zip) OWN RENT
_____ YEARS AT THIS ADDRESS	_____ YEARS AT THIS ADDRESS
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)	COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)
EMPLOYMENT/INCOME	EMPLOYMENT/INCOME
NAME AND ADDRESS OF EMPLOYER	NAME AND ADDRESS OF EMPLOYER
TITLE START DATE HOURS AT WORK	TITLE START DATE HOURS AT WORK
SUPERVISOR'S NAME IF SELF EMPLOYED, TYPE OF BUSINESS	SUPERVISOR'S NAME IF SELF EMPLOYED, TYPE OF BUSINESS
NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.	NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.
EMPLOYMENT INCOME \$ _____ Per _____ OTHER INCOME \$ _____ Per _____	EMPLOYMENT INCOME \$ _____ Per _____ OTHER INCOME \$ _____ Per _____
<input type="checkbox"/> NET <input type="checkbox"/> GROSS SOURCE	<input type="checkbox"/> NET <input type="checkbox"/> GROSS SOURCE
PREVIOUS EMPLOYER AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS STARTING DATE	PREVIOUS EMPLOYER AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS STARTING DATE
_____ _____	_____ _____
_____ _____	_____ _____
_____ _____	_____ _____

FOR CREDIT UNION USE ONLY

APPROVED _____ REJECTED _____ APPROVED AMOUNT \$ _____ DEBT RATIO/SCORE _____

LOAN OFFICER COMMENTS: _____

SIGNATURES:
 X _____ X _____
 _____ DATE _____ X _____

REFERENCES	RELATIONSHIP
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	HOME PHONE
PERSONAL REFERENCE: NAME	
ADDRESS	PHONE
PERSONAL REFERENCE: NAME	
ADDRESS	PHONE

REFERENCES	RELATIONSHIP
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	HOME PHONE
PERSONAL REFERENCE: NAME	
ADDRESS	PHONE
PERSONAL REFERENCE: NAME	
ADDRESS	PHONE

LIST ALL CREDITORS (INCLUDING BILLS NOT TO BE PAID BY THIS LOAN)

WHAT YOU OWE	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST RATE	PRESENT BALANCE	MONTHLY PAYMENT	OWED BY	
					APPLICANT	OTHER
Rent/Mortgage			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED:			TOTALS	\$	\$	

WHAT YOU OWN	LIST OF LOCATION OF PROPERTY OR FINANCIAL INSTITUTION	MARKET VALUE	PLEGGED AS COLLATERAL FOR ANOTHER LOAN	OWNED BY	
				APPLICANT	OTHER
		\$			
		\$			
		\$			
		\$			
		\$			

OTHER INFORMATION ABOUT YOU	IF YOU ANSWER "YES" TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN ATTACHED SHEET	APPLICANT	OTHER
1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?			
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGEMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST 7 YEARS, OR BEEN A PARTY IN A LAWSUIT?			
3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?			
4. ARE YOU A CO-MAKER, CO-SIGNER, OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? FOR WHOM (Name of Others Obligated on Loan):	TO WHOM (Name of Creditor):		

STATE LAW NOTICES	OHIO RESIDENTS ONLY: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.	furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.
WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is	<input checked="" type="checkbox"/> SIGNATURE FOR WISCONSIN RESIDENTS ONLY DATE	

SIGNATURES	
You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension or collection of the credit received. You understand that the Credit Union will rely on the information in	this application and your credit report to make its decision. If you request, 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 NCUA.
<input checked="" type="checkbox"/> (SEAL) APPLICANT'S SIGNATURE	<input checked="" type="checkbox"/> (SEAL) APPLICANT'S SIGNATURE
DATE	DATE