

ALLEGHENY CENTRAL EMPLOYEES FEDERAL CREDIT UNION

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www.acefcu.org

Married Applicants: May apply for a separate account.

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 (AK,AX,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 relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the other 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.

AMOUNT REQUESTED:	PURPOSE:	TERM:
REPAYMENT METHOD:	<input type="checkbox"/> AUTOMATIC PAYMENT <input type="checkbox"/> PAYROLL DEDUCTION	<input type="checkbox"/> CASH
PAYMENT PROTECTION:	<input type="checkbox"/> LIFE <input type="checkbox"/> JOINT LIFE <input type="checkbox"/> DISABILITY <input type="checkbox"/> LIFE & DISABILITY	<input type="checkbox"/> JOINT LIFE & DISABILITY <input type="checkbox"/> NONE

PERSONAL DATA

APPLICANT		<input type="checkbox"/> SPOUSE	<input type="checkbox"/> CO-APPLICANT	<input type="checkbox"/> OTHER
Name(Last- First-Initial):		Name(Last- First-Initial):		
DRIVER'S LICENSE NUMBER/STATE	DATE OF BIRTH	DRIVER'S LICENSE NUMBER/STATE	DATE OF BIRTH	
SOCIAL SECURITY NUMBER:	ACCOUNT#:	SOCIAL SECURITY NUMBER:	ACCOUNT#:	
PRESENT ADDRESS:	HOW LONG:	PRESENT ADDRESS:	HOW LONG:	
PREVIOUS ADDRESS:(If less than 2yrs.)	HOW LONG:	PREVIOUS ADDRESS:(If less than 2yrs.)	HOW LONG:	
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, Married, Divorced)		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, Married, Divorced)		
LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (EXCLUDE SELF)		LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT (EXCLUDE SELF)		

EMPLOYMENT:

NAME AND ADDRESS OF EMPLOYER:		NAME AND ADDRESS OF EMPLOYER:	
TITLE/POSITION:	START DATE:	TITLE/POSITION:	START DATE:
IF SELF-EMPLOYED: TYPE OF BUSINESS	HOW LONG:	IF SELF-EMPLOYED: TYPE OF BUSINESS	HOW LONG:
IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS:	IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS:		
START DATE:	END DATE:	START DATE:	END DATE:
EMPLOYMENT INCOME:	PER:	<input type="checkbox"/> NET <input type="checkbox"/> GROSS	EMPLOYMENT INCOME:
PER: <input type="checkbox"/> NET <input type="checkbox"/> GROSS		PER: <input type="checkbox"/> NET <input type="checkbox"/> GROSS	
MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR: <input type="checkbox"/> YES <input type="checkbox"/> NO		MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR: <input type="checkbox"/> YES <input type="checkbox"/> NO	
WHERE:	ENDING/SEPARATION DATE:	WHERE:	ENDING SEPARTION DATE:

OTHER INCOME:

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.
SOURCE: \$ _____ PER:	SOURCE: \$ _____ PER:

REFERENCE:

Name & Address of nearest relative not living with you.	Name & Address of nearest relative not living with you.
Relationship: Phone:	Relationship: Phone:

DEBTS - MONTHLY OBLIGATIONS

List all debts (for example: auto loans, mortgages, credit cards, student loans)

CREDITOR NAME	BALANCE	PAYMENT	TYPE OF LOAN	OTHER INFO
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		

LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCE AND CREDIT HISTORY CAN BE CHECKED.

ASSETS

APPLICANT		OTHER(CO-APPLICANT, SPOUSE)	
SHARE DRAFT OR CHECKING BALANCE: \$ _____	NAME AND ADDRESS OF DEPOSITORY:	SHARE DRAFT OR CHECKING BALANCE: \$ _____	NAME AND ADDRESS OF DEPOSITORY:

APPLICANT	OTHER	ASSET TYPE	LIST HOME AND ALL OTHER ITEMS YOU OWN AND LOCATION OF PROPERTY	MARKET VALUE	PLEDGE AS COLLATER FOR ANOTHER LOAN
<input type="checkbox"/>	<input type="checkbox"/>			\$	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/>	<input type="checkbox"/>			\$	<input type="checkbox"/> YES <input type="checkbox"/> NO

FINANCIAL INFORMATION: These questions apply to both Applicant and Other. If a YES answer is given to a question, explain on an attached sheet.

	APPLICANT		OTHER	
DO YOU HAVE ANY OUTSTANDING JUDGEMENTS?	YES	NO	YES	NO
HAVE YOU EVER FILED BANKRUPTCY OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13?	YES	NO	YES	NO
HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN A DEED IN LIEU OF FORECLOSURE IN THE LAST 7 YEARS?	YES	NO	YES	NO
ARE YOU A PARTY IN A LAWSUIT?	YES	NO	YES	NO
ARE YOU OTHER THAN A U.S. CITIZENS OR PERMANENT RESIDENT ALIEN?	YES	NO	YES	NO
IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?	YES	NO	YES	NO
ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE?	YES	NO	YES	NO

FOR WHOM: _____ NAME OF CREDITOR: _____

STATE LAW NOTICES OHIO RESIDENTS ONLY: The Ohio laws 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.

WISCONSIN RESIDENTS ONLY: (1) No provision of any martial property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the right of the Credit Union.
 Unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before 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 form, if granted, will be incurred in the interest of the marriage of family of the undersigned.

SIGNATURE OF WISONSIN RESIDENTS ONLY _____ DATE: _____

SIGNATURES:

You promise that everything you 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 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.

FOR CREDIT UNION USE ONLY

DATE:	<input type="checkbox"/> APPROVED	FICO SCORE:	RATE DISCOUNT:	LOAN OFFICER SIGNATURE:
	<input type="checkbox"/> DECLINED	RATE:	<input type="checkbox"/> 0.50% OR <input type="checkbox"/> 1.00%	