

|                                 |
|---------------------------------|
| ARE YOU A MEMBER?      Y      N |
| DATE OF THIS APPLICATION        |
| ACCOUNT #                       |
| PURPOSE                         |
| AMOUNT YOU REQUESTED \$         |



**Northern Tier**  
Federal Credit Union

## LOAN APPLICATION

(NOT FOR REAL ESTATE LOANS)

### APPLICANT

|   |   |                             |
|---|---|-----------------------------|
| NAME (LAST) (FIRST) (INITIAL)   |   |                             |
| DRIVER'S LICENSE NUMBER   |   | SOCIAL SECURITY NUMBER      |
| BIRTHDATE   | HOME PHONE<br>( )   | WORK PHONE/EXTENSION<br>( ) |
| CELL PHONE<br>( )   | EMAIL   |                             |
| PRESENT ADDRESS (STREET, CITY, STATE, ZIP)  |   |                             |
| YEARS AT THIS ADDRESS   | <input type="checkbox"/> OWN<br><input type="checkbox"/> RENT | RENT OR PAYMENT AMOUNT      |
| PREVIOUS ADDRESS (IF NOT AT PRESENT ADDRESS FIVE YEARS)   |   |                             |
| COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:<br><input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (SINGLE, DIVORCED, WIDOWED) |   |                             |
| NUMBER OF DEPENDENTS OTHER THAN LISTED BY OTHER APPLICANT (EXCLUDE SELF)  |   |                             |

### EMPLOYMENT AND INCOME INFORMATION

|   |   |                        |
|---|---|------------------------|
| NAME & ADDRESS OF EMPLOYER  |   |                        |
| TITLE/GRADE   |   | SUPERVISOR             |
| STARTING DATE   | SELF-EMPLOYED<br><input type="checkbox"/> Yes <input type="checkbox"/> No | TYPE OF BUSINESS       |
| MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR?<br><input type="checkbox"/> Yes <input type="checkbox"/> No       | WHERE   | ENDING/SEPARATION DATE |
| NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED. |   |                        |
| <input type="checkbox"/> NET EMPLOYMENT INCOME  | OTHER INCOME  | SOURCE OF OTHER INCOME |
| <input type="checkbox"/> GROSS  | \$  |                        |
| \$  | PER   | PER                    |
| IF EMPLOYED IN CURRENT POSITION LESS THAN TWO YEARS, COMPLETE THE FOLLOWING:  |   |                        |
| PREVIOUS EMPLOYER NAME & ADDRESS  |   | STARTING DATE          |
|   |   | ENDING DATE            |
| TITLE/GRADE   |   | SUPERVISOR             |

### TYPE OF APPLICATION

CHECK ONLY **ONE** OF THE THREE TYPES:

**INDIVIDUAL CREDIT** - YOU ARE RELYING **SOLELY** ON YOUR INCOME OR ASSETS.

**INDIVIDUAL CREDIT** - YOU ARE RELYING ON MY INCOME OR ASSETS AS WELL AS INCOME OR ASSETS FROM OTHER SOURCES.

**JOINT CREDIT** - BY INITIALING BELOW, YOU INTEND TO APPLY FOR "JOINT CREDIT".

APPLICANT \_\_\_\_\_      JOINT APPLICANT \_\_\_\_\_

### REFERENCES

|  |              |
|--|--------------|
| NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | RELATIONSHIP |
|  | TELEPHONE    |
| NAME & ADDRESS OF RELATIVE NOT LIVING WITH YOU         | RELATIONSHIP |
|  | HOME PHONE   |
| NAME & ADDRESS OF PERSONAL FRIEND — NOT A RELATIVE     | HOME PHONE   |

CONTINUED ON REVERSE SIDE

## CO-APPLICANT

|   |   |                             |
|---|---|-----------------------------|
| NAME (LAST) (FIRST) (INITIAL)   |   |                             |
| DRIVER'S LICENSE NUMBER   |   | SOCIAL SECURITY NUMBER      |
| BIRTHDATE   | HOME PHONE<br>( )   | WORK PHONE/EXTENSION<br>( ) |
| CELL PHONE<br>( )   | EMAIL   |                             |
| PRESENT ADDRESS (STREET, CITY, STATE, ZIP)  |   |                             |
| YEARS AT THIS ADDRESS   | <input type="checkbox"/> OWN<br><input type="checkbox"/> RENT | RENT OR PAYMENT AMOUNT      |
| PREVIOUS ADDRESS (IF NOT AT PRESENT ADDRESS FIVE YEARS)   |   |                             |
| COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:<br><input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (SINGLE, DIVORCED, WIDOWED) |   |                             |
| NUMBER OF DEPENDENTS OTHER THAN LISTED BY OTHER APPLICANT (EXCLUDE SELF)  |   |                             |

## EMPLOYMENT AND INCOME INFORMATION

|   |   |                        |
|---|---|------------------------|
| NAME & ADDRESS OF EMPLOYER  |   |                        |
| TITLE/GRADE   |   | SUPERVISOR             |
| STARTING DATE   | SELF-EMPLOYED<br><input type="checkbox"/> Yes <input type="checkbox"/> No | TYPE OF BUSINESS       |
| MILITARY: IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR?<br><input type="checkbox"/> Yes <input type="checkbox"/> No       | WHERE   | ENDING/SEPARATION DATE |
| NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED. |   |                        |
| <input type="checkbox"/> NET EMPLOYMENT INCOME  | OTHER INCOME  | SOURCE OF OTHER INCOME |
| <input type="checkbox"/> GROSS \$   | \$  |                        |
| PER   | PER   |                        |
| IF EMPLOYED IN CURRENT POSITION LESS THAN TWO YEARS, COMPLETE THE FOLLOWING:  |   |                        |
| PREVIOUS EMPLOYER NAME & ADDRESS  |   | STARTING DATE          |
|   |   | ENDING DATE            |
| TITLE/GRADE   |   | SUPERVISOR             |

## Are you interested in :

|   |
|---|
| <b>1. A SERVICE AGREEMENT</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MAYBE               |
| <b>2. GAP (GUARANTEED ASSET PROTECTION)</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MAYBE |
| <b>3. CREDIT LIFE OR DISABILITY</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MAYBE         |

## REFERENCES

|  |              |
|--|--------------|
| NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | RELATIONSHIP |
|  | TELEPHONE    |
| NAME & ADDRESS OF RELATIVE NOT LIVING WITH YOU         | RELATIONSHIP |
|  | HOME PHONE   |
| NAME & ADDRESS OF PERSONAL FRIEND — NOT A RELATIVE     | HOME PHONE   |

## THESE QUESTIONS APPLY TO BOTH APPLICANT & CO-APPLICANT

| IF A "YES" ANSWER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET   | Applicant |    | Co-Applicant |    | IF A "YES" ANSWER IS GIVEN TO A QUESTION, EXPLAIN ON AN ATTACHED SHEET   | Applicant |    | Co-Applicant |    |
|--|-----------|----|--------------|----|--|-----------|----|--------------|----|
|  | YES       | NO | YES          | NO |  | YES       | NO | YES          | NO |
| HAVE YOU ANY OUTSTANDING JUDGMENTS?  |           |    |              |    | IS YOUR INCOME LIKELY TO REDUCE IN THE NEXT TWO YEARS?                   |           |    |              |    |
| IN THE LAST 10 YEARS, HAVE YOU BEEN DECLARED BANKRUPT OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13 OF THE BANKRUPTCY CODE? |           |    |              |    | ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE? |           |    |              |    |
| HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN TITLE OR DEED IN LIEU THEREOF, IN THE LAST SEVEN YEARS?                                 |           |    |              |    | FOR WHOM (NAME OF OTHERS OBLIGATED ON LOAN):                             |           |    |              |    |
| ARE YOU A PARTY IN A LAW SUIT?   |           |    |              |    | TO WHOM (NAME OF CREDITOR):  |           |    |              |    |
| ARE YOU OTHER THAN A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?   |           |    |              |    |  |           |    |              |    |

## SIGNATURES

You authorize us to contact you using any of your telephone numbers - regardless whether the number is assigned to a paging service, cellular telephone service, specialized mobile radio service, other radio common carrier service or any other service for which you may be charged for the call. You further authorize us to contact you through the use of voice, text and email and through the use of prerecorded/artificial voice messages or an automatic dialing device. You promise that everything you have stated in this 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 the credit received. 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. You understand that 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 NCUA. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. **Due to the Privacy Act of 1974, we are requesting that you do hereby waive the provisions of the Military Service to release to Northern Tier Federal Credit Union any credit records based on the period of military service and any forwarding address or home address the Military Service may have after discharged, retirement, or change of station. I agree that in event of my discharge or release from active military service prior to full repayment of the loan granted, I will pay the balance on or before such discharge or release.** You apply for credit under the terms disclosed in the Truth-In-Lending Disclosure.

|                                   |      |   |      |
|-----------------------------------|------|---|------|
| APPLICANT'S SIGNATURE<br><b>X</b> | DATE | CHECK ONE: <input type="checkbox"/> CO-APPLICANT <input type="checkbox"/> GUARANTOR SIGNATURE<br><b>X</b> | DATE |
| (SEAL)                            |      | (SEAL)  |      |